

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

ADDRESS (number and street) P.O. Box 2291 Durham NC 27702 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00312223 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 07 01 2009 through 12 31 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kenneth Wright

Signature of Treasurer Electronically Filed by Kenneth Wright Date 01 28 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Table with 10 columns and 1 row. Column 1: Office Use Only. Column 2-10: Empty. Column 11: FEC FORM 3X (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		18098.06
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	58572.10									
(c) Total Receipts (from Line 19)	63898.93	128744.14								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	122471.03	146842.20								
7. Total Disbursements (from Line 31)	37518.40	61889.57								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	84952.63	84952.63								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	59482.51	105409.86
(ii) Unitemized	4416.42	23334.28
(iii) TOTAL (add Lines 11(a)(i) and (ii)	63898.93	128744.14
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	63898.93	128744.14
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	63898.93	128744.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	63898.93	128744.14

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13500.00	18000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	768.40	769.57
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	768.40	769.57
29. Other Disbursements.....	23250.00	43120.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	37518.40	61889.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	37518.40	61889.57

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	63898.93	128744.14
34. Total Contribution Refunds (from Line 28(d))	768.40	769.57
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	63130.53	127974.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 394

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
H Jorgenia Abernathy

Mailing Address 108 Hoteling Ct

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 560.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 02 / 2009

Transaction ID: SA11AI.79020

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)
H Jorgenia Abernathy

Mailing Address 108 Hoteling Ct

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2009

Transaction ID: SA11AI.79191

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)
H Jorgenia Abernathy

Mailing Address 108 Hoteling Ct

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 640.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2009

Transaction ID: SA11AI.79361

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional) ▶

120.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
H Jorgenia Abernathy

Mailing Address 108 Hoteling Ct

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. C

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 14 / 2009

Transaction ID: SA11AI.79530

Amount of Each Receipt this Period 40.00

B.

Full Name (Last, First, Middle Initial)
H Jorgenia Abernathy

Mailing Address 108 Hoteling Ct

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. C

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt 08 / 28 / 2009

Transaction ID: SA11AI.79697

Amount of Each Receipt this Period 40.00

C.

Full Name (Last, First, Middle Initial)
H Jorgenia Abernathy

Mailing Address 108 Hoteling Ct

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. C

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt 09 / 11 / 2009

Transaction ID: SA11AI.79864

Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) 120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
H Jorgenia Abernathy

Mailing Address 108 Hoteling Ct

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 25 / 2009

Transaction ID: SA11AI.80032

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
H Jorgenia Abernathy

Mailing Address 108 Hoteling Ct

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
840.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 09 / 2009

Transaction ID: SA11AI.80200

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
H Jorgenia Abernathy

Mailing Address 108 Hoteling Ct

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
880.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 23 / 2009

Transaction ID: SA11AI.80367

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **120.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 394		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) H Jorgenia Abernathy		Date of Receipt																					
	Mailing Address 108 Hoteling Ct		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	6	/	2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1	/	0	6	/	2	0	0	9														
	City State Zip Code Chapel Hill NC 27514		Transaction ID: SA11AI.80534																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00																						
Name of Employer BCBSNC Occupation VP		Aggregate Year-to-Date ▼ 920.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

B.	Full Name (Last, First, Middle Initial) H Jorgenia Abernathy		Date of Receipt																					
	Mailing Address 108 Hoteling Ct		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	0	/	2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1	/	2	0	/	2	0	0	9														
	City State Zip Code Chapel Hill NC 27514		Transaction ID: SA11AI.80701																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00																						
Name of Employer BCBSNC Occupation VP		Aggregate Year-to-Date ▼ 960.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

C.	Full Name (Last, First, Middle Initial) H Jorgenia Abernathy		Date of Receipt																					
	Mailing Address 108 Hoteling Ct		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	4	/	2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2	/	0	4	/	2	0	0	9														
	City State Zip Code Chapel Hill NC 27514		Transaction ID: SA11AI.80868																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00																						
Name of Employer BCBSNC Occupation VP		Aggregate Year-to-Date ▼ 1000.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) H Jorgenia Abernathy	Date of Receipt MM / DD / YYYY 12 / 18 / 2009
	Mailing Address 108 Hoteling Ct	Transaction ID: SA11AI.81534
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1040.00	

B.	Full Name (Last, First, Middle Initial) H Jorgenia Abernathy	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 108 Hoteling Ct	Transaction ID: SA11AI.81202
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1080.00	

C.	Full Name (Last, First, Middle Initial) Frances Adams	Date of Receipt MM / DD / YYYY 10 / 09 / 2009
	Mailing Address 1 Chatham Lane	Transaction ID: SA11AI.80202
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 210.00	

SUBTOTAL of Receipts This Page (optional)	90.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Frances Adams
 Mailing Address 1 Chatham Lane
 City State Zip Code
 Chapel Hill NC 27514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00
 Date of Receipt: 10 / 23 / 2009
Transaction ID: SA11AI.80369
 Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Frances Adams
 Mailing Address 1 Chatham Lane
 City State Zip Code
 Chapel Hill NC 27514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00
 Date of Receipt: 11 / 06 / 2009
Transaction ID: SA11AI.80536
 Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Frances Adams
 Mailing Address 1 Chatham Lane
 City State Zip Code
 Chapel Hill NC 27514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00
 Date of Receipt: 11 / 20 / 2009
Transaction ID: SA11AI.80703
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Frances Adams

Mailing Address 1 Chatham Lane

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.80870

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Frances Adams

Mailing Address 1 Chatham Lane

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81536

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Frances Adams

Mailing Address 1 Chatham Lane

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81204

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **30.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 394

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Bradley Adcock

Mailing Address 106 Lindenthal Court

City State Zip Code
Cary NC 27513

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1445.50

Date of Receipt

MM / DD / YYYY
07 / 02 / 2009

Transaction ID: SA11AI.79023

Amount of Each Receipt this Period

103.25

B.

Full Name (Last, First, Middle Initial)

Bradley Adcock

Mailing Address 106 Lindenthal Court

City State Zip Code
Cary NC 27513

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1548.75

Date of Receipt

MM / DD / YYYY
07 / 17 / 2009

Transaction ID: SA11AI.79194

Amount of Each Receipt this Period

103.25

C.

Full Name (Last, First, Middle Initial)

Bradley Adcock

Mailing Address 106 Lindenthal Court

City State Zip Code
Cary NC 27513

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1652.00

Date of Receipt

MM / DD / YYYY
07 / 31 / 2009

Transaction ID: SA11AI.79364

Amount of Each Receipt this Period

103.25

SUBTOTAL of Receipts This Page (optional)

309.75

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Bradley Adcock		Date of Receipt MM / DD / YYYY 08 / 14 / 2009
Mailing Address 106 Lindenthal Court		Transaction ID: SA11AI.79533
City Cary	State NC	Zip Code 27513
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 103.25
Name of Employer BCBSNC	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1755.25	

B.

Full Name (Last, First, Middle Initial) Bradley Adcock		Date of Receipt MM / DD / YYYY 08 / 28 / 2009
Mailing Address 106 Lindenthal Court		Transaction ID: SA11AI.79700
City Cary	State NC	Zip Code 27513
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 103.25
Name of Employer BCBSNC	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1858.50	

C.

Full Name (Last, First, Middle Initial) Bradley Adcock		Date of Receipt MM / DD / YYYY 09 / 11 / 2009
Mailing Address 106 Lindenthal Court		Transaction ID: SA11AI.79867
City Cary	State NC	Zip Code 27513
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 103.25
Name of Employer BCBSNC	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1961.75	

SUBTOTAL of Receipts This Page (optional)	309.75
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 394
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Bradley Adcock		Date of Receipt
	Mailing Address 106 Lindenthal Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 25 / 2009
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80035
Name of Employer BCBSNC		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 2065.00	<input type="text"/> 103.25

B.	Full Name (Last, First, Middle Initial) Bradley Adcock		Date of Receipt
	Mailing Address 106 Lindenthal Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 10 / 09 / 2009
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80203
Name of Employer BCBSNC		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 2168.25	<input type="text"/> 103.25

C.	Full Name (Last, First, Middle Initial) Bradley Adcock		Date of Receipt
	Mailing Address 106 Lindenthal Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 10 / 23 / 2009
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80370
Name of Employer BCBSNC		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 2271.50	<input type="text"/> 103.25

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 309.75
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 394
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Bradley Adcock	Date of Receipt MM / DD / YYYY 11 / 06 / 2009
	Mailing Address 106 Lindenthal Court	Transaction ID: SA11AI.80537
	City State Zip Code Cary NC 27513	Amount of Each Receipt this Period 103.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2374.75

B.	Full Name (Last, First, Middle Initial) Bradley Adcock	Date of Receipt MM / DD / YYYY 11 / 20 / 2009
	Mailing Address 106 Lindenthal Court	Transaction ID: SA11AI.80704
	City State Zip Code Cary NC 27513	Amount of Each Receipt this Period 103.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2478.00

C.	Full Name (Last, First, Middle Initial) Bradley Adcock	Date of Receipt MM / DD / YYYY 12 / 04 / 2009
	Mailing Address 106 Lindenthal Court	Transaction ID: SA11AI.80871
	City State Zip Code Cary NC 27513	Amount of Each Receipt this Period 103.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2581.25

SUBTOTAL of Receipts This Page (optional)	309.75
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial) Bradley Adcock Mailing Address 106 Lindenthal Court City Cary State NC Zip Code 27513 FEC ID number of contributing federal political committee. C Name of Employer BCBSNC Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2684.50	Date of Receipt <table border="1" style="width:100%"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>1</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Transaction ID: SA11AI.81537 Amount of Each Receipt this Period <table border="1" style="width:100%"> <tr> <td style="text-align:right">103.25</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	8	/	2	0	0	9	103.25
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	1	8	/	2	0	0	9													
103.25																						

B. Full Name (Last, First, Middle Initial) Bradley Adcock Mailing Address 106 Lindenthal Court City Cary State NC Zip Code 27513 FEC ID number of contributing federal political committee. C Name of Employer BCBSNC Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2787.75	Date of Receipt <table border="1" style="width:100%"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Transaction ID: SA11AI.81205 Amount of Each Receipt this Period <table border="1" style="width:100%"> <tr> <td style="text-align:right">103.25</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	3	1	/	2	0	0	9	103.25
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	3	1	/	2	0	0	9													
103.25																						

C. Full Name (Last, First, Middle Initial) William Alberti Mailing Address 5347 Yardley Terrace City Durham State NC Zip Code 27707 FEC ID number of contributing federal political committee. C Name of Employer BCBSNC Occupation Assoc. General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 364.21	Date of Receipt <table border="1" style="width:100%"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Transaction ID: SA11AI.79024 Amount of Each Receipt this Period <table border="1" style="width:100%"> <tr> <td style="text-align:right">26.24</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	0	2	/	2	0	0	9	26.24
M	M	/	D	D	/	Y	Y	Y	Y													
0	7	/	0	2	/	2	0	0	9													
26.24																						

SUBTOTAL of Receipts This Page (optional) ▶	<table border="1" style="width:100%"> <tr> <td style="text-align:right">232.74</td> </tr> </table>	232.74
232.74		
TOTAL This Period (last page this line number only) ▶	<table border="1" style="width:100%"> <tr> <td style="text-align:right"> </td> </tr> </table>	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
William Alberti
 Mailing Address 5347 Yardley Terrace
 City State Zip Code
Durham NC 27707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Assoc. General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.45
 Date of Receipt M M / D D / Y Y Y Y Y
07 / 17 / 2009
Transaction ID: SA11AI.79195
 Amount of Each Receipt this Period 26.24

B. Full Name (Last, First, Middle Initial)
William Alberti
 Mailing Address 5347 Yardley Terrace
 City State Zip Code
Durham NC 27707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Assoc. General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.69
 Date of Receipt M M / D D / Y Y Y Y Y
07 / 31 / 2009
Transaction ID: SA11AI.79365
 Amount of Each Receipt this Period 26.24

C. Full Name (Last, First, Middle Initial)
William Alberti
 Mailing Address 5347 Yardley Terrace
 City State Zip Code
Durham NC 27707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Assoc. General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 442.93
 Date of Receipt M M / D D / Y Y Y Y Y
08 / 14 / 2009
Transaction ID: SA11AI.79534
 Amount of Each Receipt this Period 26.24

SUBTOTAL of Receipts This Page (optional) ► 78.72
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 394
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) William Alberti		Date of Receipt
	Mailing Address 5347 Yardley Terrace		<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Durham	NC	27707
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation Assoc. General Counsel	Transaction ID: SA11AI.79701
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="469.17"/>	<input type="text" value="26.24"/>

B.	Full Name (Last, First, Middle Initial) William Alberti		Date of Receipt
	Mailing Address 5347 Yardley Terrace		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Durham	NC	27707
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation Assoc. General Counsel	Transaction ID: SA11AI.79868
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="495.41"/>	<input type="text" value="26.24"/>

C.	Full Name (Last, First, Middle Initial) William Alberti		Date of Receipt
	Mailing Address 5347 Yardley Terrace		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Durham	NC	27707
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation Assoc. General Counsel	Transaction ID: SA11AI.80036
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="521.65"/>	<input type="text" value="26.24"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="78.72"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
William Alberti

Mailing Address 5347 Yardley Terrace

City State Zip Code
Durham NC 27707

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Assoc. General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 547.89

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.80204

Amount of Each Receipt this Period
26.24

B. Full Name (Last, First, Middle Initial)
William Alberti

Mailing Address 5347 Yardley Terrace

City State Zip Code
Durham NC 27707

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Assoc. General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 574.13

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.80371

Amount of Each Receipt this Period
26.24

C. Full Name (Last, First, Middle Initial)
William Alberti

Mailing Address 5347 Yardley Terrace

City State Zip Code
Durham NC 27707

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Assoc. General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.37

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.80538

Amount of Each Receipt this Period
26.24

SUBTOTAL of Receipts This Page (optional) ► 78.72

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
William Alberti

Mailing Address 5347 Yardley Terrace

City State Zip Code
Durham NC 27707

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Assoc. General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 626.61

Date of Receipt
MM / DD / YYYY
11 / 20 / 2009

Transaction ID: SA11AI.80705

Amount of Each Receipt this Period
26.24

B. Full Name (Last, First, Middle Initial)
William Alberti

Mailing Address 5347 Yardley Terrace

City State Zip Code
Durham NC 27707

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Assoc. General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 652.85

Date of Receipt
MM / DD / YYYY
12 / 04 / 2009

Transaction ID: SA11AI.80872

Amount of Each Receipt this Period
26.24

C. Full Name (Last, First, Middle Initial)
William Alberti

Mailing Address 5347 Yardley Terrace

City State Zip Code
Durham NC 27707

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Assoc. General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 679.09

Date of Receipt
MM / DD / YYYY
12 / 18 / 2009

Transaction ID: SA11AI.81538

Amount of Each Receipt this Period
26.24

SUBTOTAL of Receipts This Page (optional) ► **78.72**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 394

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

William Alberti

Mailing Address 5347 Yardley Terrace

City State Zip Code
Durham NC 27707

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Assoc. General Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 705.33

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81206

Amount of Each Receipt this Period

26.24

B.

Full Name (Last, First, Middle Initial)

John Armentrout

Mailing Address 108 Woodleaf Dr

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Project Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.80206

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

John Armentrout

Mailing Address 108 Woodleaf Dr

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Project Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.80373

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

46.24

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
John Armentrout

Mailing Address 108 Woodleaf Dr

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Project Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2009

Transaction ID: SA11AI.80540

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
John Armentrout

Mailing Address 108 Woodleaf Dr

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Project Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
11 / 20 / 2009

Transaction ID: SA11AI.80707

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
John Armentrout

Mailing Address 108 Woodleaf Dr

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Project Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
12 / 04 / 2009

Transaction ID: SA11AI.80874

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
John Armentrout
Mailing Address 108 Woodleaf Dr
City Chapel Hill State NC Zip Code 27516
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Project Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00
Date of Receipt 12 / 18 / 2009
Transaction ID: SA11AI.81540
Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
John Armentrout
Mailing Address 108 Woodleaf Dr
City Chapel Hill State NC Zip Code 27516
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Project Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00
Date of Receipt 12 / 31 / 2009
Transaction ID: SA11AI.81208
Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Daniel Atherton
Mailing Address 8800 Hatton Court
City Charlotte State NC Zip Code 28277
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Regional Sales Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt 07 / 02 / 2009
Transaction ID: SA11AI.79027
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ► 45.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Daniel Atherton		Date of Receipt MM / DD / YYYY 07 / 17 / 2009
Mailing Address 8800 Hatton Court		Transaction ID: SA11AI.79198
City Charlotte	State NC	Zip Code 28277
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer BCBSNC	Occupation Regional Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

B.

Full Name (Last, First, Middle Initial) Daniel Atherton		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
Mailing Address 8800 Hatton Court		Transaction ID: SA11AI.79368
City Charlotte	State NC	Zip Code 28277
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer BCBSNC	Occupation Regional Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.

Full Name (Last, First, Middle Initial) Daniel Atherton		Date of Receipt MM / DD / YYYY 08 / 14 / 2009
Mailing Address 8800 Hatton Court		Transaction ID: SA11AI.79537
City Charlotte	State NC	Zip Code 28277
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer BCBSNC	Occupation Regional Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 394

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Daniel Atherton

Mailing Address 8800 Hatton Court

City State Zip Code
Charlotte NC 28277

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
Regional Sales Director

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 28 / 2009

Transaction ID: SA11AI.79704

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Daniel Atherton

Mailing Address 8800 Hatton Court

City State Zip Code
Charlotte NC 28277

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
Regional Sales Director

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 11 / 2009

Transaction ID: SA11AI.79871

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Daniel Atherton

Mailing Address 8800 Hatton Court

City State Zip Code
Charlotte NC 28277

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
Regional Sales Director

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 25 / 2009

Transaction ID: SA11AI.80039

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 394

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Daniel Atherton

Mailing Address 8800 Hatton Court

City State Zip Code
Charlotte NC 28277

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Regional Sales Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 525.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.80207

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)

Daniel Atherton

Mailing Address 8800 Hatton Court

City State Zip Code
Charlotte NC 28277

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Regional Sales Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.80374

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)

Daniel Atherton

Mailing Address 8800 Hatton Court

City State Zip Code
Charlotte NC 28277

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Regional Sales Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 575.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.80541

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ▶

75.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 394

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Daniel Atherton

Mailing Address 8800 Hatton Court

City State Zip Code
Charlotte NC 28277

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Regional Sales Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.80708

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)

Daniel Atherton

Mailing Address 8800 Hatton Court

City State Zip Code
Charlotte NC 28277

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Regional Sales Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.80875

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)

Daniel Atherton

Mailing Address 8800 Hatton Court

City State Zip Code
Charlotte NC 28277

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Regional Sales Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81541

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ▶

75.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Daniel Atherton

Mailing Address 8800 Hatton Court

City State Zip Code
Charlotte NC 28277

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81209

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
R Craig Bailey

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Mgr. Analytics

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 0 2 / 2 0 0 9

Transaction ID: SA11AI.79029

Amount of Each Receipt this Period
15.00

C. Full Name (Last, First, Middle Initial)
R Craig Bailey

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Mgr. Analytics

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.79200

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **55.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
R Craig Bailey

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Mgr. Analytics

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: MM / DD / YYYY 07 / 31 / 2009

Transaction ID: SA11AI.79370

Amount of Each Receipt this Period 15.00

B. Full Name (Last, First, Middle Initial)
R Craig Bailey

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Mgr. Analytics

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt: MM / DD / YYYY 08 / 14 / 2009

Transaction ID: SA11AI.79539

Amount of Each Receipt this Period 15.00

C. Full Name (Last, First, Middle Initial)
R Craig Bailey

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Mgr. Analytics

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: MM / DD / YYYY 08 / 28 / 2009

Transaction ID: SA11AI.79706

Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) ► 45.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) R Craig Bailey	Date of Receipt MM / DD / YYYY 09 / 11 / 2009
	Mailing Address	Transaction ID: SA11AI.79873
	City State Zip Code	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	Name of Employer: BCBSNC Occupation: Mgr. Analytics Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00

B.	Full Name (Last, First, Middle Initial) R Craig Bailey	Date of Receipt MM / DD / YYYY 09 / 25 / 2009
	Mailing Address	Transaction ID: SA11AI.80041
	City State Zip Code	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	Name of Employer: BCBSNC Occupation: Mgr. Analytics Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

C.	Full Name (Last, First, Middle Initial) R Craig Bailey	Date of Receipt MM / DD / YYYY 10 / 09 / 2009
	Mailing Address	Transaction ID: SA11AI.80209
	City State Zip Code	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	Name of Employer: BCBSNC Occupation: Mgr. Analytics Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 315.00

SUBTOTAL of Receipts This Page (optional)	▶	45.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
R Craig Bailey

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Mgr. Analytics

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 10 / 23 / 2009
Transaction ID: SA11AI.80376
Amount of Each Receipt this Period: 15.00

B. Full Name (Last, First, Middle Initial)
R Craig Bailey

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Mgr. Analytics

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt: 11 / 06 / 2009
Transaction ID: SA11AI.80543
Amount of Each Receipt this Period: 15.00

C. Full Name (Last, First, Middle Initial)
R Craig Bailey

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Mgr. Analytics

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 11 / 20 / 2009
Transaction ID: SA11AI.80710
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ▶ 45.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) R Craig Bailey		Date of Receipt MM / DD / YYYY 12 / 04 / 2009
Mailing Address		Transaction ID: SA11AI.80877
City State Zip Code		Amount of Each Receipt this Period 15.00
FEC ID number of contributing federal political committee. C	Occupation Mgr. Analytics	
Name of Employer BCBSNC	Aggregate Year-to-Date 375.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) R Craig Bailey		Date of Receipt MM / DD / YYYY 12 / 18 / 2009
Mailing Address		Transaction ID: SA11AI.81543
City State Zip Code		Amount of Each Receipt this Period 15.00
FEC ID number of contributing federal political committee. C	Occupation Mgr. Analytics	
Name of Employer BCBSNC	Aggregate Year-to-Date 390.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) R Craig Bailey		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address		Transaction ID: SA11AI.81211
City State Zip Code		Amount of Each Receipt this Period 15.00
FEC ID number of contributing federal political committee. C	Occupation Mgr. Analytics	
Name of Employer BCBSNC	Aggregate Year-to-Date 405.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	45.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) J. Joseph Bauers		Date of Receipt	
	Mailing Address 203 Woodleaf Dr.		M M / D D / Y Y Y Y Y 07 / 02 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79031
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		15.00	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		210.00		

B.	Full Name (Last, First, Middle Initial) J. Joseph Bauers		Date of Receipt	
	Mailing Address 203 Woodleaf Dr.		M M / D D / Y Y Y Y Y 07 / 17 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79202
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		15.00	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		225.00		

C.	Full Name (Last, First, Middle Initial) J. Joseph Bauers		Date of Receipt	
	Mailing Address 203 Woodleaf Dr.		M M / D D / Y Y Y Y Y 07 / 31 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79372
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		15.00	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		240.00		

SUBTOTAL of Receipts This Page (optional)	▶	45.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 / 394
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) J. Joseph Bauers		Date of Receipt MM / DD / YYYY 08 / 14 / 2009		
	Mailing Address 203 Woodleaf Dr.		Transaction ID: SA11AI.79541		
	City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director	Aggregate Year-to-Date 255.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) J. Joseph Bauers		Date of Receipt MM / DD / YYYY 08 / 28 / 2009		
	Mailing Address 203 Woodleaf Dr.		Transaction ID: SA11AI.79708		
	City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director	Aggregate Year-to-Date 270.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) J. Joseph Bauers		Date of Receipt MM / DD / YYYY 09 / 11 / 2009		
	Mailing Address 203 Woodleaf Dr.		Transaction ID: SA11AI.79875		
	City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director	Aggregate Year-to-Date 285.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	▶	45.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
J. Joseph Bauers
Mailing Address 203 Woodleaf Dr.
City Chapel Hill State NC Zip Code 27516
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 09 / 25 / 2009
Transaction ID: SA11AI.80043
Amount of Each Receipt this Period 15.00

B. Full Name (Last, First, Middle Initial)
J. Joseph Bauers
Mailing Address 203 Woodleaf Dr.
City Chapel Hill State NC Zip Code 27516
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 315.00
Date of Receipt 10 / 09 / 2009
Transaction ID: SA11AI.80211
Amount of Each Receipt this Period 15.00

C. Full Name (Last, First, Middle Initial)
J. Joseph Bauers
Mailing Address 203 Woodleaf Dr.
City Chapel Hill State NC Zip Code 27516
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00
Date of Receipt 10 / 23 / 2009
Transaction ID: SA11AI.80378
Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) ► 45.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
J. Joseph Bauers
Mailing Address 203 Woodleaf Dr.
City Chapel Hill State NC Zip Code 27516
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 345.00
Date of Receipt 11 / 06 / 2009
Transaction ID: SA11AI.80545
Amount of Each Receipt this Period 15.00

B. Full Name (Last, First, Middle Initial)
J. Joseph Bauers
Mailing Address 203 Woodleaf Dr.
City Chapel Hill State NC Zip Code 27516
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00
Date of Receipt 11 / 20 / 2009
Transaction ID: SA11AI.80712
Amount of Each Receipt this Period 15.00

C. Full Name (Last, First, Middle Initial)
J. Joseph Bauers
Mailing Address 203 Woodleaf Dr.
City Chapel Hill State NC Zip Code 27516
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00
Date of Receipt 12 / 04 / 2009
Transaction ID: SA11AI.80879
Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) ► 45.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) J. Joseph Bauers		Date of Receipt	
	Mailing Address 203 Woodleaf Dr.		M M / D D / Y Y Y Y Y 1 2 / 1 8 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.81545
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		15.00	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		390.00		

B.	Full Name (Last, First, Middle Initial) J. Joseph Bauers		Date of Receipt	
	Mailing Address 203 Woodleaf Dr.		M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.81213
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		15.00	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		405.00		

C.	Full Name (Last, First, Middle Initial) Tracy Bennett		Date of Receipt	
	Mailing Address 208 Linville Springs Rd.		M M / D D / Y Y Y Y Y 1 0 / 0 9 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.80212
	Kernersville	NC	27248	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		10.00	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		210.00		

SUBTOTAL of Receipts This Page (optional)	▶	40.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Tracy Bennett

Mailing Address 208 Linville Springs Rd.

City State Zip Code
Kernersville NC 27248

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.80379

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Tracy Bennett

Mailing Address 208 Linville Springs Rd.

City State Zip Code
Kernersville NC 27248

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.80546

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Tracy Bennett

Mailing Address 208 Linville Springs Rd.

City State Zip Code
Kernersville NC 27248

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.80713

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **30.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Tracy Bennett

Mailing Address 208 Linville Springs Rd.

City State Zip Code
Kernersville NC 27248

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.80880

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Tracy Bennett

Mailing Address 208 Linville Springs Rd.

City State Zip Code
Kernersville NC 27248

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81546

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Tracy Bennett

Mailing Address 208 Linville Springs Rd.

City State Zip Code
Kernersville NC 27248

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81214

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **30.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Gary Bolt

Mailing Address 4801 Highgate Drive

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
853.18

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	2	/	2	0	0	9

Transaction ID: SA11AI.79034

Amount of Each Receipt this Period
62.02

B. Full Name (Last, First, Middle Initial)
Gary Bolt

Mailing Address 4801 Highgate Drive

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
915.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	7	/	2	0	0	9

Transaction ID: SA11AI.79205

Amount of Each Receipt this Period
62.02

C. Full Name (Last, First, Middle Initial)
Gary Bolt

Mailing Address 4801 Highgate Drive

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
977.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	1	/	2	0	0	9

Transaction ID: SA11AI.79375

Amount of Each Receipt this Period
62.02

SUBTOTAL of Receipts This Page (optional) ► **186.06**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Gary Bolt

Mailing Address 4801 Highgate Drive

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1039.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	4	/	2	0	0	9

Transaction ID: SA11AI.79544

Amount of Each Receipt this Period
62.02

B. Full Name (Last, First, Middle Initial)
Gary Bolt

Mailing Address 4801 Highgate Drive

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1101.26

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	8	/	2	0	0	9

Transaction ID: SA11AI.79711

Amount of Each Receipt this Period
62.02

C. Full Name (Last, First, Middle Initial)
Gary Bolt

Mailing Address 4801 Highgate Drive

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1163.28

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	1	/	2	0	0	9

Transaction ID: SA11AI.79878

Amount of Each Receipt this Period
62.02

SUBTOTAL of Receipts This Page (optional) ► **186.06**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Gary Bolt

Mailing Address 4801 Highgate Drive

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1225.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	9

Transaction ID: SA11AI.80046

Amount of Each Receipt this Period
62.02

B. Full Name (Last, First, Middle Initial)
Gary Bolt

Mailing Address 4801 Highgate Drive

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1287.32

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	9	/	2	0	0	9

Transaction ID: SA11AI.80214

Amount of Each Receipt this Period
62.02

C. Full Name (Last, First, Middle Initial)
Gary Bolt

Mailing Address 4801 Highgate Drive

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1349.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	9

Transaction ID: SA11AI.80381

Amount of Each Receipt this Period
62.02

SUBTOTAL of Receipts This Page (optional) ► **186.06**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Gary Bolt	Date of Receipt
	Mailing Address 4801 Highgate Drive	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 06 / 2009
	City State Zip Code Durham NC 27713	Transaction ID: SA11AI.80548
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 62.02
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 1411.36	

B.	Full Name (Last, First, Middle Initial) Gary Bolt	Date of Receipt
	Mailing Address 4801 Highgate Drive	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 20 / 2009
	City State Zip Code Durham NC 27713	Transaction ID: SA11AI.80715
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 62.02
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 1473.38	

C.	Full Name (Last, First, Middle Initial) Gary Bolt	Date of Receipt
	Mailing Address 4801 Highgate Drive	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 12 / 04 / 2009
	City State Zip Code Durham NC 27713	Transaction ID: SA11AI.80882
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 62.02
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 1535.40	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 186.06
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Gary Bolt

Mailing Address 4801 Highgate Drive

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1597.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	8	/	2	0	0	9

Transaction ID: SA11AI.81548

Amount of Each Receipt this Period

62.02

B.

Full Name (Last, First, Middle Initial)
Gary Bolt

Mailing Address 4801 Highgate Drive

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1659.44

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	9

Transaction ID: SA11AI.81216

Amount of Each Receipt this Period

62.02

C.

Full Name (Last, First, Middle Initial)
H Lewis Borman

Mailing Address 104 Ironwoods Drive

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Program Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 218.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	2	/	2	0	0	9

Transaction ID: SA11AI.79035

Amount of Each Receipt this Period

15.71

SUBTOTAL of Receipts This Page (optional)

139.75

TOTAL This Period (last page this line number only)

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) H Lewis Borman	Date of Receipt MM / DD / YYYY 07 / 17 / 2009
	Mailing Address 104 Ironwoods Drive	Transaction ID: SA11AI.79206
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 15.71
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.75	

B.	Full Name (Last, First, Middle Initial) H Lewis Borman	Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 104 Ironwoods Drive	Transaction ID: SA11AI.79376
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 15.71
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.46	

C.	Full Name (Last, First, Middle Initial) H Lewis Borman	Date of Receipt MM / DD / YYYY 08 / 14 / 2009
	Mailing Address 104 Ironwoods Drive	Transaction ID: SA11AI.79545
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 15.71
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.17	

SUBTOTAL of Receipts This Page (optional)	▶	47.13
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) H Lewis Borman		Date of Receipt MM / DD / YYYY 08 / 28 / 2009
Mailing Address 104 Ironwoods Drive		Transaction ID: SA11AI.79712
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.71
Name of Employer BCBSNC	Occupation Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.88	

B.

Full Name (Last, First, Middle Initial) H Lewis Borman		Date of Receipt MM / DD / YYYY 09 / 11 / 2009
Mailing Address 104 Ironwoods Drive		Transaction ID: SA11AI.79879
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.71
Name of Employer BCBSNC	Occupation Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 296.59	

C.

Full Name (Last, First, Middle Initial) H Lewis Borman		Date of Receipt MM / DD / YYYY 09 / 25 / 2009
Mailing Address 104 Ironwoods Drive		Transaction ID: SA11AI.80047
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.71
Name of Employer BCBSNC	Occupation Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312.30	

SUBTOTAL of Receipts This Page (optional)	47.13
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) H Lewis Borman		Date of Receipt MM / DD / YYYY 10 / 09 / 2009
Mailing Address 104 Ironwoods Drive		Transaction ID: SA11AI.80215
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.71
Name of Employer BCBSNC	Occupation Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 328.01	

B.

Full Name (Last, First, Middle Initial) H Lewis Borman		Date of Receipt MM / DD / YYYY 10 / 23 / 2009
Mailing Address 104 Ironwoods Drive		Transaction ID: SA11AI.80382
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.71
Name of Employer BCBSNC	Occupation Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 343.72	

C.

Full Name (Last, First, Middle Initial) H Lewis Borman		Date of Receipt MM / DD / YYYY 11 / 06 / 2009
Mailing Address 104 Ironwoods Drive		Transaction ID: SA11AI.80549
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.71
Name of Employer BCBSNC	Occupation Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 359.43	

SUBTOTAL of Receipts This Page (optional)	▶	47.13
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) H Lewis Borman		Date of Receipt MM / DD / YYYY 11 / 20 / 2009		
	Mailing Address 104 Ironwoods Drive		Transaction ID: SA11AI.80716		
	City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 15.71	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 375.14		
Name of Employer BCBSNC		Occupation Program Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) H Lewis Borman		Date of Receipt MM / DD / YYYY 12 / 04 / 2009		
	Mailing Address 104 Ironwoods Drive		Transaction ID: SA11AI.80883		
	City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 15.71	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 390.85		
Name of Employer BCBSNC		Occupation Program Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) H Lewis Borman		Date of Receipt MM / DD / YYYY 12 / 18 / 2009		
	Mailing Address 104 Ironwoods Drive		Transaction ID: SA11AI.81549		
	City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 15.71	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 406.56		
Name of Employer BCBSNC		Occupation Program Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	▶	47.13
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) H Lewis Borman		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 104 Ironwoods Drive		Transaction ID: SA11AI.81217
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.71
Name of Employer BCBSNC	Occupation Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 422.27	

B.

Full Name (Last, First, Middle Initial) W Don Bradley		Date of Receipt MM / DD / YYYY 07 / 02 / 2009
Mailing Address 15 Altmont Ct		Transaction ID: SA11AI.79036
City Durham	State NC	Zip Code 27705
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 135.38
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1843.42	

C.

Full Name (Last, First, Middle Initial) W Don Bradley		Date of Receipt MM / DD / YYYY 07 / 17 / 2009
Mailing Address 15 Altmont Ct		Transaction ID: SA11AI.79207
City Durham	State NC	Zip Code 27705
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 135.38
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1978.80	

SUBTOTAL of Receipts This Page (optional)	286.47
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) W Don Bradley		Date of Receipt	
	Mailing Address 15 Altmont Ct		M M / D D / Y Y Y Y Y 07 / 31 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79377
	Durham	NC	27705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		135.38	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2114.18		

B.	Full Name (Last, First, Middle Initial) W Don Bradley		Date of Receipt	
	Mailing Address 15 Altmont Ct		M M / D D / Y Y Y Y Y 08 / 14 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79546
	Durham	NC	27705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		135.38	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2249.56		

C.	Full Name (Last, First, Middle Initial) W Don Bradley		Date of Receipt	
	Mailing Address 15 Altmont Ct		M M / D D / Y Y Y Y Y 08 / 28 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79713
	Durham	NC	27705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		135.38	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2384.94		

SUBTOTAL of Receipts This Page (optional)	▶	406.14
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) W Don Bradley		Date of Receipt
	Mailing Address 15 Altmont Ct		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 11 / 2009
	City	State	Zip Code
	Durham	NC	27705
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.79880
Name of Employer BCBSNC		Occupation SVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 135.38
		<input type="text"/> 2520.32	

B.	Full Name (Last, First, Middle Initial) W Don Bradley		Date of Receipt
	Mailing Address 15 Altmont Ct		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 25 / 2009
	City	State	Zip Code
	Durham	NC	27705
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80048
Name of Employer BCBSNC		Occupation SVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 135.38
		<input type="text"/> 2655.70	

C.	Full Name (Last, First, Middle Initial) W Don Bradley		Date of Receipt
	Mailing Address 15 Altmont Ct		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 10 / 09 / 2009
	City	State	Zip Code
	Durham	NC	27705
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80216
Name of Employer BCBSNC		Occupation SVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 135.38
		<input type="text"/> 2791.08	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 406.14
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
W Don Bradley

Mailing Address 15 Altmont Ct

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2926.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	9

Transaction ID: SA11AI.80383

Amount of Each Receipt this Period
135.38

B. Full Name (Last, First, Middle Initial)
W Don Bradley

Mailing Address 15 Altmont Ct

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3061.84

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	0	9

Transaction ID: SA11AI.80550

Amount of Each Receipt this Period
135.38

C. Full Name (Last, First, Middle Initial)
W Don Bradley

Mailing Address 15 Altmont Ct

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3197.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	0	/	2	0	0	9

Transaction ID: SA11AI.80717

Amount of Each Receipt this Period
135.38

SUBTOTAL of Receipts This Page (optional) ► **406.14**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 394

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

W Don Bradley

Mailing Address 15 Altmont Ct

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC SVP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3332.60

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.80884

Amount of Each Receipt this Period
135.38

B.

Full Name (Last, First, Middle Initial)

W Don Bradley

Mailing Address 15 Altmont Ct

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC SVP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3467.98

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81550

Amount of Each Receipt this Period
135.38

C.

Full Name (Last, First, Middle Initial)

W Don Bradley

Mailing Address 15 Altmont Ct

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC SVP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3603.36

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81218

Amount of Each Receipt this Period
135.38

SUBTOTAL of Receipts This Page (optional) ▶

406.14

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Cynthia Brenneman		Date of Receipt	
	Mailing Address 14 Steepleton Court		M M / D D / Y Y Y Y Y 07 / 02 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79037
	Hillsborough	NC	27278	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		58.93	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		825.01		

B.	Full Name (Last, First, Middle Initial) Cynthia Brenneman		Date of Receipt	
	Mailing Address 14 Steepleton Court		M M / D D / Y Y Y Y Y 07 / 17 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79208
	Hillsborough	NC	27278	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		58.93	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		883.94		

C.	Full Name (Last, First, Middle Initial) Cynthia Brenneman		Date of Receipt	
	Mailing Address 14 Steepleton Court		M M / D D / Y Y Y Y Y 07 / 31 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79378
	Hillsborough	NC	27278	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		58.93	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		942.87		

SUBTOTAL of Receipts This Page (optional)	▶	176.79
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 56 / 394
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Cynthia Brenneman		Date of Receipt
	Mailing Address 14 Steepleton Court		<input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Hillsborough	NC	27278
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation VP	Transaction ID: SA11AI.79547
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1001.80"/>	<input type="text" value="58.93"/>

B.	Full Name (Last, First, Middle Initial) Cynthia Brenneman		Date of Receipt
	Mailing Address 14 Steepleton Court		<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Hillsborough	NC	27278
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation VP	Transaction ID: SA11AI.79714
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1060.73"/>	<input type="text" value="58.93"/>

C.	Full Name (Last, First, Middle Initial) Cynthia Brenneman		Date of Receipt
	Mailing Address 14 Steepleton Court		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Hillsborough	NC	27278
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation VP	Transaction ID: SA11AI.79881
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1119.66"/>	<input type="text" value="58.93"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="176.79"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Cynthia Brenneman
 Mailing Address 14 Steepleton Court
 City Hillsborough State NC Zip Code 27278
 Date of Receipt 09 / 25 / 2009
Transaction ID: SA11AI.80049
 Amount of Each Receipt this Period 58.93
 FEC ID number of contributing federal political committee. C
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1178.59

B. Full Name (Last, First, Middle Initial)
L Wade Brown
 Mailing Address
 City State Zip Code
 Date of Receipt 07 / 02 / 2009
Transaction ID: SA11AI.79039
 Amount of Each Receipt this Period 25.00
 FEC ID number of contributing federal political committee. C
 Name of Employer BCBSNC Occupation Producer Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

C. Full Name (Last, First, Middle Initial)
L Wade Brown
 Mailing Address
 City State Zip Code
 Date of Receipt 07 / 17 / 2009
Transaction ID: SA11AI.79210
 Amount of Each Receipt this Period 25.00
 FEC ID number of contributing federal political committee. C
 Name of Employer BCBSNC Occupation Producer Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

SUBTOTAL of Receipts This Page (optional) ► 108.93
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) L Wade Brown	Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address	Transaction ID: SA11AI.79380
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Producer Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) L Wade Brown	Date of Receipt MM / DD / YYYY 08 / 14 / 2009
	Mailing Address	Transaction ID: SA11AI.79549
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Producer Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

C.	Full Name (Last, First, Middle Initial) L Wade Brown	Date of Receipt MM / DD / YYYY 08 / 28 / 2009
	Mailing Address	Transaction ID: SA11AI.79716
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Producer Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) L Wade Brown		Date of Receipt MM / DD / YYYY 09 / 11 / 2009
Mailing Address		Transaction ID: SA11AI.79883
City State Zip Code		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation Producer Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

B.

Full Name (Last, First, Middle Initial) L Wade Brown		Date of Receipt MM / DD / YYYY 09 / 25 / 2009
Mailing Address		Transaction ID: SA11AI.80051
City State Zip Code		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation Producer Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) L Wade Brown		Date of Receipt MM / DD / YYYY 10 / 09 / 2009
Mailing Address		Transaction ID: SA11AI.80218
City State Zip Code		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation Producer Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) L Wade Brown</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC</p> <p>Occupation Producer Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 550.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 9</p> <p>Transaction ID: SA11AI.80385</p> <p>Amount of Each Receipt this Period 25.00</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) L Wade Brown</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC</p> <p>Occupation Producer Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 575.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 9</p> <p>Transaction ID: SA11AI.80552</p> <p>Amount of Each Receipt this Period 25.00</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) L Wade Brown</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC</p> <p>Occupation Producer Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 600.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 9</p> <p>Transaction ID: SA11AI.80719</p> <p>Amount of Each Receipt this Period 25.00</p>
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SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) L Wade Brown		Date of Receipt
	Mailing Address		<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: SA11AI.80886
Name of Employer BCBSNC		Occupation Producer Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="625.00"/>	<input type="text" value="25.00"/>

B.	Full Name (Last, First, Middle Initial) L Wade Brown		Date of Receipt
	Mailing Address		<input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: SA11AI.81552
Name of Employer BCBSNC		Occupation Producer Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="650.00"/>	<input type="text" value="25.00"/>

C.	Full Name (Last, First, Middle Initial) L Wade Brown		Date of Receipt
	Mailing Address		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: SA11AI.81220
Name of Employer BCBSNC		Occupation Producer Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="675.00"/>	<input type="text" value="25.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Milo Brunick		Date of Receipt MM / DD / YYYY 07 / 02 / 2009		
	Mailing Address 4020 Grayson Ridge Court		Transaction ID: SA11AI.79040		
	City Raleigh	State NC	Zip Code 27613	Amount of Each Receipt this Period 85.14	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1191.96		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Milo Brunick		Date of Receipt MM / DD / YYYY 07 / 17 / 2009		
	Mailing Address 4020 Grayson Ridge Court		Transaction ID: SA11AI.79211		
	City Raleigh	State NC	Zip Code 27613	Amount of Each Receipt this Period 85.14	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1277.10		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Milo Brunick		Date of Receipt MM / DD / YYYY 07 / 31 / 2009		
	Mailing Address 4020 Grayson Ridge Court		Transaction ID: SA11AI.79381		
	City Raleigh	State NC	Zip Code 27613	Amount of Each Receipt this Period 85.14	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1362.24		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	▶	255.42
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City Raleigh State NC Zip Code 27613

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1447.38

Date of Receipt: 08 / 14 / 2009
Transaction ID: SA11AI.79550
 Amount of Each Receipt this Period: 85.14

B.

Full Name (Last, First, Middle Initial)
Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City Raleigh State NC Zip Code 27613

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1532.52

Date of Receipt: 08 / 28 / 2009
Transaction ID: SA11AI.79717
 Amount of Each Receipt this Period: 85.14

C.

Full Name (Last, First, Middle Initial)
Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City Raleigh State NC Zip Code 27613

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1617.66

Date of Receipt: 09 / 11 / 2009
Transaction ID: SA11AI.79884
 Amount of Each Receipt this Period: 85.14

SUBTOTAL of Receipts This Page (optional) ► 255.42

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City Raleigh State NC Zip Code 27613

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1702.80

Date of Receipt: 09 / 25 / 2009
Transaction ID: SA11AI.80052
 Amount of Each Receipt this Period: 85.14

B.

Full Name (Last, First, Middle Initial)
Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City Raleigh State NC Zip Code 27613

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1787.94

Date of Receipt: 10 / 09 / 2009
Transaction ID: SA11AI.80219
 Amount of Each Receipt this Period: 85.14

C.

Full Name (Last, First, Middle Initial)
Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City Raleigh State NC Zip Code 27613

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1873.08

Date of Receipt: 10 / 23 / 2009
Transaction ID: SA11AI.80386
 Amount of Each Receipt this Period: 85.14

SUBTOTAL of Receipts This Page (optional) ► 255.42

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Milo Brunick		Date of Receipt	
	Mailing Address 4020 Grayson Ridge Court		M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.80553
	Raleigh	NC	27613	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		85.14	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1958.22		

B.	Full Name (Last, First, Middle Initial) Milo Brunick		Date of Receipt	
	Mailing Address 4020 Grayson Ridge Court		M M / D D / Y Y Y Y Y 1 1 / 2 0 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.80720
	Raleigh	NC	27613	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		85.14	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2043.36		

C.	Full Name (Last, First, Middle Initial) Milo Brunick		Date of Receipt	
	Mailing Address 4020 Grayson Ridge Court		M M / D D / Y Y Y Y Y 1 2 / 0 4 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.80887
	Raleigh	NC	27613	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		85.14	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2128.50		

SUBTOTAL of Receipts This Page (optional)	▶	255.42
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City Raleigh State NC Zip Code 27613

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2213.64

Date of Receipt: 12 / 18 / 2009
Transaction ID: SA11AI.81553
 Amount of Each Receipt this Period: 85.14

B. Full Name (Last, First, Middle Initial)
Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City Raleigh State NC Zip Code 27613

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2298.78

Date of Receipt: 12 / 31 / 2009
Transaction ID: SA11AI.81221
 Amount of Each Receipt this Period: 85.14

C. Full Name (Last, First, Middle Initial)
L Lisa Cade

Mailing Address 104 Ackworth Court

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 07 / 02 / 2009
Transaction ID: SA11AI.79043
 Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 220.28

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
L Lisa Cade

Mailing Address 104 Ackworth Court

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 07 / 17 / 2009
Transaction ID: SA11AI.79214
 Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
L Lisa Cade

Mailing Address 104 Ackworth Court

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 07 / 31 / 2009
Transaction ID: SA11AI.79384
 Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
L Lisa Cade

Mailing Address 104 Ackworth Court

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt: 08 / 14 / 2009
Transaction ID: SA11AI.79553
 Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
L Lisa Cade

Mailing Address 104 Ackworth Court

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 08 / 28 / 2009
Transaction ID: SA11AI.79720
 Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
L Lisa Cade

Mailing Address 104 Ackworth Court

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt: 09 / 11 / 2009
Transaction ID: SA11AI.79887
 Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
L Lisa Cade

Mailing Address 104 Ackworth Court

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 25 / 2009
Transaction ID: SA11AI.80055
 Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
L Lisa Cade

Mailing Address 104 Ackworth Court

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.80222

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
L Lisa Cade

Mailing Address 104 Ackworth Court

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.80389

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
L Lisa Cade

Mailing Address 104 Ackworth Court

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1150.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.80556

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) L Lisa Cade	Date of Receipt MM / DD / YYYY 11 / 20 / 2009
	Mailing Address 104 Ackworth Court	Transaction ID: SA11AI.80723
	City Cary State NC Zip Code 27519	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1200.00	

B.	Full Name (Last, First, Middle Initial) L Lisa Cade	Date of Receipt MM / DD / YYYY 12 / 04 / 2009
	Mailing Address 104 Ackworth Court	Transaction ID: SA11AI.80890
	City Cary State NC Zip Code 27519	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1250.00	

C.	Full Name (Last, First, Middle Initial) L Lisa Cade	Date of Receipt MM / DD / YYYY 12 / 18 / 2009
	Mailing Address 104 Ackworth Court	Transaction ID: SA11AI.81556
	City Cary State NC Zip Code 27519	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1300.00	

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 394

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

L Lisa Cade

Mailing Address 104 Ackworth Court

City State Zip Code
Cary NC 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 31 / 2009

Transaction ID: SA11AI.81224

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Michele Cash

Mailing Address 8094 Grassy Creek Road

City State Zip Code
Oxford NC 27565

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Senior Compensation Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
371.62

Date of Receipt

M M / D D / Y Y Y Y
07 / 02 / 2009

Transaction ID: SA11AI.79046

Amount of Each Receipt this Period

26.73

C.

Full Name (Last, First, Middle Initial)

Michele Cash

Mailing Address 8094 Grassy Creek Road

City State Zip Code
Oxford NC 27565

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Senior Compensation Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
398.35

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2009

Transaction ID: SA11AI.79217

Amount of Each Receipt this Period

26.73

SUBTOTAL of Receipts This Page (optional) ▶

103.46

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Michele Cash		Date of Receipt MM / DD / YYYY 07 / 31 / 2009	
Mailing Address 8094 Grassy Creek Road		Transaction ID: SA11AI.79387	
City Oxford	State NC	Zip Code 27565	Amount of Each Receipt this Period 26.73
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation Senior Compensation Advisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.08		

B.

Full Name (Last, First, Middle Initial) Michele Cash		Date of Receipt MM / DD / YYYY 08 / 14 / 2009	
Mailing Address 8094 Grassy Creek Road		Transaction ID: SA11AI.79556	
City Oxford	State NC	Zip Code 27565	Amount of Each Receipt this Period 26.73
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation Senior Compensation Advisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 451.81		

C.

Full Name (Last, First, Middle Initial) Michele Cash		Date of Receipt MM / DD / YYYY 08 / 28 / 2009	
Mailing Address 8094 Grassy Creek Road		Transaction ID: SA11AI.79723	
City Oxford	State NC	Zip Code 27565	Amount of Each Receipt this Period 26.73
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation Senior Compensation Advisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 478.54		

SUBTOTAL of Receipts This Page (optional)	▶	80.19
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Michele Cash	Date of Receipt MM / DD / YYYY 09 / 11 / 2009
	Mailing Address 8094 Grassy Creek Road	Transaction ID: SA11AI.79890
	City Oxford State NC Zip Code 27565	Amount of Each Receipt this Period 26.73
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Senior Compensation Advisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 505.27	

B.	Full Name (Last, First, Middle Initial) Michele Cash	Date of Receipt MM / DD / YYYY 09 / 25 / 2009
	Mailing Address 8094 Grassy Creek Road	Transaction ID: SA11AI.80058
	City Oxford State NC Zip Code 27565	Amount of Each Receipt this Period 26.73
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Senior Compensation Advisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 532.00	

C.	Full Name (Last, First, Middle Initial) Michele Cash	Date of Receipt MM / DD / YYYY 10 / 09 / 2009
	Mailing Address 8094 Grassy Creek Road	Transaction ID: SA11AI.80225
	City Oxford State NC Zip Code 27565	Amount of Each Receipt this Period 26.73
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Senior Compensation Advisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 558.73	

SUBTOTAL of Receipts This Page (optional)	▶	80.19
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Michele Cash

Mailing Address 8094 Grassy Creek Road

City Oxford State NC Zip Code 27565

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Senior Compensation Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 585.46

Date of Receipt: 10 / 23 / 2009
Transaction ID: SA11AI.80392
 Amount of Each Receipt this Period: 26.73

B.

Full Name (Last, First, Middle Initial)
Michele Cash

Mailing Address 8094 Grassy Creek Road

City Oxford State NC Zip Code 27565

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Senior Compensation Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 612.19

Date of Receipt: 11 / 06 / 2009
Transaction ID: SA11AI.80559
 Amount of Each Receipt this Period: 26.73

C.

Full Name (Last, First, Middle Initial)
Michele Cash

Mailing Address 8094 Grassy Creek Road

City Oxford State NC Zip Code 27565

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Senior Compensation Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 630.90

Date of Receipt: 11 / 20 / 2009
Transaction ID: SA11AI.80726
 Amount of Each Receipt this Period: 18.71

SUBTOTAL of Receipts This Page (optional) ► 72.17

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 75 / 394						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Michele Cash		Date of Receipt																					
	Mailing Address 8094 Grassy Creek Road		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	4		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		0	4		2	0	0	9														
	City State Zip Code Oxford NC 27565		Transaction ID: SA11AI.80893																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.73																						
Name of Employer BCBSNC		Occupation Senior Compensation Advisor																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 657.63																						

B.	Full Name (Last, First, Middle Initial) Michele Cash		Date of Receipt																					
	Mailing Address 8094 Grassy Creek Road		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	8		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		1	8		2	0	0	9														
	City State Zip Code Oxford NC 27565		Transaction ID: SA11AI.81559																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.73																						
Name of Employer BCBSNC		Occupation Senior Compensation Advisor																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 684.36																						

C.	Full Name (Last, First, Middle Initial) Michele Cash		Date of Receipt																					
	Mailing Address 8094 Grassy Creek Road		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		3	1		2	0	0	9														
	City State Zip Code Oxford NC 27565		Transaction ID: SA11AI.81227																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.73																						
Name of Employer BCBSNC		Occupation Senior Compensation Advisor																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 711.09																						

SUBTOTAL of Receipts This Page (optional)	▶	80.19
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 394

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 280.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 02 / 2009

Transaction ID: SA11AI.79047

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2009

Transaction ID: SA11AI.79218

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2009

Transaction ID: SA11AI.79388

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional) ▶

60.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	4	/	2	0	0	9

Transaction ID: SA11AI.79557

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	8	/	2	0	0	9

Transaction ID: SA11AI.79724

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	1	/	2	0	0	9

Transaction ID: SA11AI.79891

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **60.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	9

Transaction ID: SA11AI.80059

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	9	/	2	0	0	9

Transaction ID: SA11AI.80226

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	9

Transaction ID: SA11AI.80393

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **60.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Steven Cherrier		Date of Receipt MM / DD / YYYY 11 / 06 / 2009
Mailing Address 1207 Holly Creek Lane		Transaction ID: SA11AI.80560
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

B.

Full Name (Last, First, Middle Initial) Steven Cherrier		Date of Receipt MM / DD / YYYY 11 / 20 / 2009
Mailing Address 1207 Holly Creek Lane		Transaction ID: SA11AI.80727
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

C.

Full Name (Last, First, Middle Initial) Steven Cherrier		Date of Receipt MM / DD / YYYY 12 / 04 / 2009
Mailing Address 1207 Holly Creek Lane		Transaction ID: SA11AI.80894
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	60.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 394

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81560

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)

Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 540.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81228

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)

Geoffrey Clasper

Mailing Address 708 Pinehurst Drive

City State Zip Code
Chapel Hill NC 27517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 560.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 2 / 2 0 0 9

Transaction ID: SA11AI.79048

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ▶

80.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Geoffrey Clasper

Mailing Address 708 Pinehurst Drive

City State Zip Code
Chapel Hill NC 27517

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 17 / 2009

Transaction ID: SA11AI.79219

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
Geoffrey Clasper

Mailing Address 708 Pinehurst Drive

City State Zip Code
Chapel Hill NC 27517

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 31 / 2009

Transaction ID: SA11AI.79389

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
Geoffrey Clasper

Mailing Address 708 Pinehurst Drive

City State Zip Code
Chapel Hill NC 27517

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 14 / 2009

Transaction ID: SA11AI.79558

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **120.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Geoffrey Clasper		Date of Receipt MM / DD / YYYY 08 / 28 / 2009	
Mailing Address 708 Pinehurst Drive		Transaction ID: SA11AI.79725	
City Chapel Hill	State NC	Zip Code 27517	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00		

B.

Full Name (Last, First, Middle Initial) Geoffrey Clasper		Date of Receipt MM / DD / YYYY 09 / 11 / 2009	
Mailing Address 708 Pinehurst Drive		Transaction ID: SA11AI.79892	
City Chapel Hill	State NC	Zip Code 27517	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 760.00		

C.

Full Name (Last, First, Middle Initial) Geoffrey Clasper		Date of Receipt MM / DD / YYYY 09 / 25 / 2009	
Mailing Address 708 Pinehurst Drive		Transaction ID: SA11AI.80060	
City Chapel Hill	State NC	Zip Code 27517	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Geoffrey Clasper		Date of Receipt MM / DD / YYYY 10 / 09 / 2009
Mailing Address 708 Pinehurst Drive		Transaction ID: SA11AI.80227
City Chapel Hill	State NC	Zip Code 27517
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	

B.

Full Name (Last, First, Middle Initial) Geoffrey Clasper		Date of Receipt MM / DD / YYYY 10 / 23 / 2009
Mailing Address 708 Pinehurst Drive		Transaction ID: SA11AI.80394
City Chapel Hill	State NC	Zip Code 27517
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00	

C.

Full Name (Last, First, Middle Initial) Geoffrey Clasper		Date of Receipt MM / DD / YYYY 11 / 06 / 2009
Mailing Address 708 Pinehurst Drive		Transaction ID: SA11AI.80561
City Chapel Hill	State NC	Zip Code 27517
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 920.00	

SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Geoffrey Clasper

Mailing Address 708 Pinehurst Drive

City State Zip Code
Chapel Hill NC 27517

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	0	/	2	0	0	9

Transaction ID: SA11AI.80728

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
Geoffrey Clasper

Mailing Address 708 Pinehurst Drive

City State Zip Code
Chapel Hill NC 27517

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	4	/	2	0	0	9

Transaction ID: SA11AI.80895

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
Geoffrey Clasper

Mailing Address 708 Pinehurst Drive

City State Zip Code
Chapel Hill NC 27517

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1040.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	8	/	2	0	0	9

Transaction ID: SA11AI.81561

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **120.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 394

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Geoffrey Clasper

Mailing Address 708 Pinehurst Drive

City State Zip Code
Chapel Hill NC 27517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1080.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81229

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

M Stephen Dean

Mailing Address 505 Lake Hogan Farm Rd

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 767.06

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 2 / 2 0 0 9

Transaction ID: SA11AI.79057

Amount of Each Receipt this Period

54.79

C.

Full Name (Last, First, Middle Initial)

M Stephen Dean

Mailing Address 505 Lake Hogan Farm Rd

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 821.85

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.79228

Amount of Each Receipt this Period

54.79

SUBTOTAL of Receipts This Page (optional) ▶

149.58

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) M Stephen Dean	Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 505 Lake Hogan Farm Rd	Transaction ID: SA11AI.79398
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 54.79
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 876.64	

B.	Full Name (Last, First, Middle Initial) M Stephen Dean	Date of Receipt MM / DD / YYYY 08 / 14 / 2009
	Mailing Address 505 Lake Hogan Farm Rd	Transaction ID: SA11AI.79567
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 54.79
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 931.43	

C.	Full Name (Last, First, Middle Initial) M Stephen Dean	Date of Receipt MM / DD / YYYY 08 / 28 / 2009
	Mailing Address 505 Lake Hogan Farm Rd	Transaction ID: SA11AI.79734
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 54.79
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 986.22	

SUBTOTAL of Receipts This Page (optional)	▶	164.37
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
M Stephen Dean

Mailing Address 505 Lake Hogan Farm Rd

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1041.01

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	1	/	2	0	0	9

Transaction ID: SA11AI.79901

Amount of Each Receipt this Period
54.79

B. Full Name (Last, First, Middle Initial)
M Stephen Dean

Mailing Address 505 Lake Hogan Farm Rd

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1095.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	9

Transaction ID: SA11AI.80069

Amount of Each Receipt this Period
54.79

C. Full Name (Last, First, Middle Initial)
M Stephen Dean

Mailing Address 505 Lake Hogan Farm Rd

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.59

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	9	/	2	0	0	9

Transaction ID: SA11AI.80236

Amount of Each Receipt this Period
54.79

SUBTOTAL of Receipts This Page (optional) ► **164.37**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) M Stephen Dean		Date of Receipt MM / DD / YYYY 10 / 23 / 2009
Mailing Address 505 Lake Hogan Farm Rd		Transaction ID: SA11AI.80403
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 54.79
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1205.38	

B.

Full Name (Last, First, Middle Initial) M Stephen Dean		Date of Receipt MM / DD / YYYY 11 / 06 / 2009
Mailing Address 505 Lake Hogan Farm Rd		Transaction ID: SA11AI.80570
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 54.79
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1260.17	

C.

Full Name (Last, First, Middle Initial) M Stephen Dean		Date of Receipt MM / DD / YYYY 11 / 20 / 2009
Mailing Address 505 Lake Hogan Farm Rd		Transaction ID: SA11AI.80737
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 54.79
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1314.96	

SUBTOTAL of Receipts This Page (optional)	▶	164.37
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 / 394

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

M Stephen Dean

Mailing Address 505 Lake Hogan Farm Rd

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1369.75

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.80904

Amount of Each Receipt this Period

54.79

B.

Full Name (Last, First, Middle Initial)

M Stephen Dean

Mailing Address 505 Lake Hogan Farm Rd

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1424.54

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81570

Amount of Each Receipt this Period

54.79

C.

Full Name (Last, First, Middle Initial)

M Stephen Dean

Mailing Address 505 Lake Hogan Farm Rd

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1479.33

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81238

Amount of Each Receipt this Period

54.79

SUBTOTAL of Receipts This Page (optional) ▶

164.37

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) G Diane DeGroff		Date of Receipt MM / DD / YYYY 07 / 02 / 2009
Mailing Address		Transaction ID: SA11AI.79059
City State Zip Code		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.

Full Name (Last, First, Middle Initial) G Diane DeGroff		Date of Receipt MM / DD / YYYY 07 / 17 / 2009
Mailing Address		Transaction ID: SA11AI.79230
City State Zip Code		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

C.

Full Name (Last, First, Middle Initial) G Diane DeGroff		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
Mailing Address		Transaction ID: SA11AI.79400
City State Zip Code		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) G Diane DeGroff		Date of Receipt MM / DD / YYYY 08 / 14 / 2009		
	Mailing Address		Transaction ID: SA11AI.79569		
	City	State	Zip Code	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director	Aggregate Year-to-Date ▼ 425.00		

B.	Full Name (Last, First, Middle Initial) G Diane DeGroff		Date of Receipt MM / DD / YYYY 08 / 28 / 2009		
	Mailing Address		Transaction ID: SA11AI.79736		
	City	State	Zip Code	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director	Aggregate Year-to-Date ▼ 450.00		

C.	Full Name (Last, First, Middle Initial) G Diane DeGroff		Date of Receipt MM / DD / YYYY 09 / 11 / 2009		
	Mailing Address		Transaction ID: SA11AI.79903		
	City	State	Zip Code	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director	Aggregate Year-to-Date ▼ 475.00		

SUBTOTAL of Receipts This Page (optional)	▶	75.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) G Diane DeGroff	Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 9
	Mailing Address	Transaction ID: SA11AI.80071
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) G Diane DeGroff	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 9 / 2 0 0 9
	Mailing Address	Transaction ID: SA11AI.80238
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

C.	Full Name (Last, First, Middle Initial) G Diane DeGroff	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 9
	Mailing Address	Transaction ID: SA11AI.80405
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) G Diane DeGroff	Date of Receipt MM / DD / YYYY 11 / 06 / 2009
	Mailing Address	Transaction ID: SA11AI.80572
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00	

B.	Full Name (Last, First, Middle Initial) G Diane DeGroff	Date of Receipt MM / DD / YYYY 11 / 20 / 2009
	Mailing Address	Transaction ID: SA11AI.80739
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

C.	Full Name (Last, First, Middle Initial) G Diane DeGroff	Date of Receipt MM / DD / YYYY 12 / 04 / 2009
	Mailing Address	Transaction ID: SA11AI.80906
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 94 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) G Diane DeGroff	Date of Receipt MM / DD / YYYY 12 / 18 / 2009
Mailing Address	Transaction ID: SA11AI.81572
City State Zip Code	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00

B.

Full Name (Last, First, Middle Initial) G Diane DeGroff	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address	Transaction ID: SA11AI.81240
City State Zip Code	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00

C.

Full Name (Last, First, Middle Initial) M Karen Dickinson	Date of Receipt MM / DD / YYYY 07 / 02 / 2009
Mailing Address 105 Corewood Court	Transaction ID: SA11AI.79060
City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 28.85
FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 392.95

SUBTOTAL of Receipts This Page (optional)	78.85
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 / 394

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

M Karen Dickinson

Mailing Address 105 Corewood Court

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 421.80

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 17 / 2009

Transaction ID: SA11AI.79231

Amount of Each Receipt this Period

28.85

B.

Full Name (Last, First, Middle Initial)

M Karen Dickinson

Mailing Address 105 Corewood Court

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.65

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2009

Transaction ID: SA11AI.79401

Amount of Each Receipt this Period

28.85

C.

Full Name (Last, First, Middle Initial)

M Karen Dickinson

Mailing Address 105 Corewood Court

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 479.50

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 14 / 2009

Transaction ID: SA11AI.79570

Amount of Each Receipt this Period

28.85

SUBTOTAL of Receipts This Page (optional) ▶

86.55

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 / 394

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

M Karen Dickinson

Mailing Address 105 Corewood Court

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 508.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	0	9

Transaction ID: SA11AI.79737

Amount of Each Receipt this Period

28.85

B.

Full Name (Last, First, Middle Initial)

M Karen Dickinson

Mailing Address 105 Corewood Court

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 537.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	0	9

Transaction ID: SA11AI.79904

Amount of Each Receipt this Period

28.85

C.

Full Name (Last, First, Middle Initial)

M Karen Dickinson

Mailing Address 105 Corewood Court

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 566.05

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	9

Transaction ID: SA11AI.80072

Amount of Each Receipt this Period

28.85

SUBTOTAL of Receipts This Page (optional) ▶

86.55

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 97 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
M Karen Dickinson

Mailing Address 105 Corewood Court

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
594.90

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.80239

Amount of Each Receipt this Period
28.85

B.

Full Name (Last, First, Middle Initial)
M Karen Dickinson

Mailing Address 105 Corewood Court

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
623.75

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.80406

Amount of Each Receipt this Period
28.85

C.

Full Name (Last, First, Middle Initial)
M Karen Dickinson

Mailing Address 105 Corewood Court

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
652.60

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.80573

Amount of Each Receipt this Period
28.85

SUBTOTAL of Receipts This Page (optional) ► **86.55**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 98 / 394

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

M Karen Dickinson

Mailing Address 105 Corewood Court

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 681.45

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.80740

Amount of Each Receipt this Period

28.85

B.

Full Name (Last, First, Middle Initial)

M Karen Dickinson

Mailing Address 105 Corewood Court

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 710.30

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.80907

Amount of Each Receipt this Period

28.85

C.

Full Name (Last, First, Middle Initial)

M Karen Dickinson

Mailing Address 105 Corewood Court

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 739.15

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81573

Amount of Each Receipt this Period

28.85

SUBTOTAL of Receipts This Page (optional)

86.55

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 99 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
M Karen Dickinson

Mailing Address 105 Corewood Court

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 768.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81241

Amount of Each Receipt this Period
28.85

B. Full Name (Last, First, Middle Initial)
Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 732.90

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 0 2 / 2 0 0 9

Transaction ID: SA11AI.79063

Amount of Each Receipt this Period
52.35

C. Full Name (Last, First, Middle Initial)
Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 785.25

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.79234

Amount of Each Receipt this Period
52.35

SUBTOTAL of Receipts This Page (optional) ► **133.55**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 100 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
837.60

Date of Receipt
MM / DD / YYYY
07 / 31 / 2009

Transaction ID: SA11AI.79404

Amount of Each Receipt this Period
52.35

B.

Full Name (Last, First, Middle Initial)
Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
889.95

Date of Receipt
MM / DD / YYYY
08 / 14 / 2009

Transaction ID: SA11AI.79573

Amount of Each Receipt this Period
52.35

C.

Full Name (Last, First, Middle Initial)
Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
942.30

Date of Receipt
MM / DD / YYYY
08 / 28 / 2009

Transaction ID: SA11AI.79740

Amount of Each Receipt this Period
52.35

SUBTOTAL of Receipts This Page (optional) ► **157.05**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 101 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 994.65

Date of Receipt

M M / D D / Y Y Y Y
09 / 11 / 2009

Transaction ID: SA11AI.79907

Amount of Each Receipt this Period

52.35

B.

Full Name (Last, First, Middle Initial)
Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1047.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 25 / 2009

Transaction ID: SA11AI.80075

Amount of Each Receipt this Period

52.35

C.

Full Name (Last, First, Middle Initial)
Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1099.35

Date of Receipt

M M / D D / Y Y Y Y
10 / 09 / 2009

Transaction ID: SA11AI.80242

Amount of Each Receipt this Period

52.35

SUBTOTAL of Receipts This Page (optional) ▶

157.05

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 102 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1151.70

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.80409

Amount of Each Receipt this Period
52.35

B.

Full Name (Last, First, Middle Initial)
Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1204.05

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.80576

Amount of Each Receipt this Period
52.35

C.

Full Name (Last, First, Middle Initial)
Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1256.40

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.80743

Amount of Each Receipt this Period
52.35

SUBTOTAL of Receipts This Page (optional) ► **157.05**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 103 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1308.75

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.80910

Amount of Each Receipt this Period
52.35

B.

Full Name (Last, First, Middle Initial)
Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1361.10

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81576

Amount of Each Receipt this Period
52.35

C.

Full Name (Last, First, Middle Initial)
Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1413.45

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81244

Amount of Each Receipt this Period
52.35

SUBTOTAL of Receipts This Page (optional) ► **157.05**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) James Emmons		Date of Receipt
	Mailing Address 105 Vyne Court		<input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Cary	NC	27519
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.79066
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="77.88"/>
		<input type="text" value="1090.32"/>	

B.	Full Name (Last, First, Middle Initial) James Emmons		Date of Receipt
	Mailing Address 105 Vyne Court		<input type="text" value="07"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Cary	NC	27519
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.79237
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="77.88"/>
		<input type="text" value="1168.20"/>	

C.	Full Name (Last, First, Middle Initial) James Emmons		Date of Receipt
	Mailing Address 105 Vyne Court		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Cary	NC	27519
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.79407
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="77.88"/>
		<input type="text" value="1246.08"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="233.64"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 105 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
James Emmons

Mailing Address 105 Vyne Court

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1323.96

Date of Receipt: 08 / 14 / 2009
Transaction ID: SA11AI.79576
 Amount of Each Receipt this Period: 77.88

B. Full Name (Last, First, Middle Initial)
James Emmons

Mailing Address 105 Vyne Court

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1401.84

Date of Receipt: 08 / 28 / 2009
Transaction ID: SA11AI.79743
 Amount of Each Receipt this Period: 77.88

C. Full Name (Last, First, Middle Initial)
James Emmons

Mailing Address 105 Vyne Court

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1479.72

Date of Receipt: 09 / 11 / 2009
Transaction ID: SA11AI.79910
 Amount of Each Receipt this Period: 77.88

SUBTOTAL of Receipts This Page (optional) ► **233.64**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 106 / 394
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) James Emmons		Date of Receipt
	Mailing Address 105 Vyne Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 25 / 2009
	City	State	Zip Code
	Cary	NC	27519
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80078
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 77.88
		<input type="text"/> 1557.60	

B.	Full Name (Last, First, Middle Initial) James Emmons		Date of Receipt
	Mailing Address 105 Vyne Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 09 / 2009
	City	State	Zip Code
	Cary	NC	27519
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80245
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 77.88
		<input type="text"/> 1635.48	

C.	Full Name (Last, First, Middle Initial) James Emmons		Date of Receipt
	Mailing Address 105 Vyne Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 23 / 2009
	City	State	Zip Code
	Cary	NC	27519
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80412
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 77.88
		<input type="text"/> 1713.36	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 233.64
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 107 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
James Emmons

Mailing Address 105 Vyne Court

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1791.24

Date of Receipt: 11 / 06 / 2009
Transaction ID: SA11AI.80579
 Amount of Each Receipt this Period: 77.88

B.

Full Name (Last, First, Middle Initial)
James Emmons

Mailing Address 105 Vyne Court

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1869.12

Date of Receipt: 11 / 20 / 2009
Transaction ID: SA11AI.80746
 Amount of Each Receipt this Period: 77.88

C.

Full Name (Last, First, Middle Initial)
James Emmons

Mailing Address 105 Vyne Court

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1947.00

Date of Receipt: 12 / 04 / 2009
Transaction ID: SA11AI.80913
 Amount of Each Receipt this Period: 77.88

SUBTOTAL of Receipts This Page (optional) ► **233.64**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 108 / 394						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) James Emmons		Date of Receipt	
	Mailing Address 105 Vyne Court		M M / D D / Y Y Y Y Y 1 2 / 1 8 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.81579
	Cary	NC	27519	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		77.88	
	Name of Employer BCBSNC		Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2024.88		

B.	Full Name (Last, First, Middle Initial) James Emmons		Date of Receipt	
	Mailing Address 105 Vyne Court		M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.81247
	Cary	NC	27519	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		77.88	
	Name of Employer BCBSNC		Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2102.76		

C.	Full Name (Last, First, Middle Initial) M Robert Fleming		Date of Receipt	
	Mailing Address 211 St. Mary's Street		M M / D D / Y Y Y Y Y 0 7 / 0 2 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.79067
	Raleigh	NC	27605	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		52.61	
	Name of Employer BCBSNC		Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 729.49		

SUBTOTAL of Receipts This Page (optional)	208.37
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 109 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
M Robert Fleming

Mailing Address 211 St. Mary's Street

City Raleigh State NC Zip Code 27605

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 782.10

Date of Receipt: 07 / 17 / 2009
Transaction ID: SA11AI.79238
Amount of Each Receipt this Period: 52.61

B.

Full Name (Last, First, Middle Initial)
M Robert Fleming

Mailing Address 211 St. Mary's Street

City Raleigh State NC Zip Code 27605

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 834.71

Date of Receipt: 07 / 31 / 2009
Transaction ID: SA11AI.79408
Amount of Each Receipt this Period: 52.61

C.

Full Name (Last, First, Middle Initial)
M Robert Fleming

Mailing Address 211 St. Mary's Street

City Raleigh State NC Zip Code 27605

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 887.32

Date of Receipt: 08 / 14 / 2009
Transaction ID: SA11AI.79577
Amount of Each Receipt this Period: 52.61

SUBTOTAL of Receipts This Page (optional) ► 157.83

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 110 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
M Robert Fleming

Mailing Address 211 St. Mary's Street

City Raleigh State NC Zip Code 27605

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 939.93

Date of Receipt: 08 / 28 / 2009
Transaction ID: SA11AI.79744
 Amount of Each Receipt this Period: 52.61

B.

Full Name (Last, First, Middle Initial)
M Robert Fleming

Mailing Address 211 St. Mary's Street

City Raleigh State NC Zip Code 27605

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 992.54

Date of Receipt: 09 / 11 / 2009
Transaction ID: SA11AI.79911
 Amount of Each Receipt this Period: 52.61

C.

Full Name (Last, First, Middle Initial)
M Robert Fleming

Mailing Address 211 St. Mary's Street

City Raleigh State NC Zip Code 27605

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1045.15

Date of Receipt: 09 / 25 / 2009
Transaction ID: SA11AI.80079
 Amount of Each Receipt this Period: 52.61

SUBTOTAL of Receipts This Page (optional) ► **157.83**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 111 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
M Robert Fleming

Mailing Address 211 St. Mary's Street

City Raleigh State NC Zip Code 27605

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1097.76

Date of Receipt: 10 / 09 / 2009
Transaction ID: SA11AI.80246
 Amount of Each Receipt this Period: 52.61

B. Full Name (Last, First, Middle Initial)
M Robert Fleming

Mailing Address 211 St. Mary's Street

City Raleigh State NC Zip Code 27605

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1150.37

Date of Receipt: 10 / 23 / 2009
Transaction ID: SA11AI.80413
 Amount of Each Receipt this Period: 52.61

C. Full Name (Last, First, Middle Initial)
M Robert Fleming

Mailing Address 211 St. Mary's Street

City Raleigh State NC Zip Code 27605

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1202.98

Date of Receipt: 11 / 06 / 2009
Transaction ID: SA11AI.80580
 Amount of Each Receipt this Period: 52.61

SUBTOTAL of Receipts This Page (optional) ► 157.83

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 112 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
M Robert Fleming

Mailing Address 211 St. Mary's Street

City Raleigh State NC Zip Code 27605

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1255.59

Date of Receipt: 11 / 20 / 2009
Transaction ID: SA11AI.80747
 Amount of Each Receipt this Period: 52.61

B.

Full Name (Last, First, Middle Initial)
M Robert Fleming

Mailing Address 211 St. Mary's Street

City Raleigh State NC Zip Code 27605

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1308.20

Date of Receipt: 12 / 04 / 2009
Transaction ID: SA11AI.80914
 Amount of Each Receipt this Period: 52.61

C.

Full Name (Last, First, Middle Initial)
M Robert Fleming

Mailing Address 211 St. Mary's Street

City Raleigh State NC Zip Code 27605

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1360.81

Date of Receipt: 12 / 18 / 2009
Transaction ID: SA11AI.81580
 Amount of Each Receipt this Period: 52.61

SUBTOTAL of Receipts This Page (optional) ► 157.83

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 113 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
M Robert Fleming

Mailing Address 211 St. Mary's Street

City Raleigh State NC Zip Code 27605

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1413.42

Date of Receipt: MM / DD / YYYY
12 / 31 / 2009

Transaction ID: SA11AI.81248

Amount of Each Receipt this Period: 52.61

B. Full Name (Last, First, Middle Initial)
John Fong

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: MM / DD / YYYY
07 / 02 / 2009

Transaction ID: SA11AI.79068

Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial)
John Fong

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: MM / DD / YYYY
07 / 17 / 2009

Transaction ID: SA11AI.79239

Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ► 102.61

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 114 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) John Fong		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
Mailing Address		Transaction ID: SA11AI.79409
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.

Full Name (Last, First, Middle Initial) John Fong		Date of Receipt MM / DD / YYYY 08 / 14 / 2009
Mailing Address		Transaction ID: SA11AI.79578
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

C.

Full Name (Last, First, Middle Initial) John Fong		Date of Receipt MM / DD / YYYY 08 / 28 / 2009
Mailing Address		Transaction ID: SA11AI.79745
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional)	▶	75.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 115 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) John Fong		Date of Receipt MM / DD / YYYY 09 / 11 / 2009
Mailing Address		Transaction ID: SA11AI.79912
City State Zip Code		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

B.

Full Name (Last, First, Middle Initial) John Fong		Date of Receipt MM / DD / YYYY 09 / 25 / 2009
Mailing Address		Transaction ID: SA11AI.80080
City State Zip Code		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) John Fong		Date of Receipt MM / DD / YYYY 10 / 09 / 2009
Mailing Address		Transaction ID: SA11AI.80247
City State Zip Code		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 116 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

John Fong

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.80414

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

John Fong

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.80581

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

John Fong

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.80748

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) ▶

75.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 117 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) John Fong		Date of Receipt MM / DD / YYYY 12 / 04 / 2009
Mailing Address		Transaction ID: SA11AI.80915
City State Zip Code		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

B.

Full Name (Last, First, Middle Initial) John Fong		Date of Receipt MM / DD / YYYY 12 / 18 / 2009
Mailing Address		Transaction ID: SA11AI.81581
City State Zip Code		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

C.

Full Name (Last, First, Middle Initial) John Fong		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address		Transaction ID: SA11AI.81249
City State Zip Code		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 118 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1472.38

Date of Receipt
MM / DD / YYYY
07 / 02 / 2009

Transaction ID: SA11AI.79069

Amount of Each Receipt this Period
105.17

B.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1577.55

Date of Receipt
MM / DD / YYYY
07 / 17 / 2009

Transaction ID: SA11AI.79240

Amount of Each Receipt this Period
105.17

C.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1682.72

Date of Receipt
MM / DD / YYYY
07 / 31 / 2009

Transaction ID: SA11AI.79410

Amount of Each Receipt this Period
105.17

SUBTOTAL of Receipts This Page (optional) ► **315.51**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 119 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1787.89

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 14 / 2009

Transaction ID: SA11AI.79579

Amount of Each Receipt this Period
105.17

B.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1893.06

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 28 / 2009

Transaction ID: SA11AI.79746

Amount of Each Receipt this Period
105.17

C.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1998.23

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 11 / 2009

Transaction ID: SA11AI.79913

Amount of Each Receipt this Period
105.17

SUBTOTAL of Receipts This Page (optional) ► **315.51**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2103.40

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 25 / 2009

Transaction ID: SA11AI.80081

Amount of Each Receipt this Period
105.17

B.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2208.57

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 09 / 2009

Transaction ID: SA11AI.80248

Amount of Each Receipt this Period
105.17

C.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2313.74

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 23 / 2009

Transaction ID: SA11AI.80415

Amount of Each Receipt this Period
105.17

SUBTOTAL of Receipts This Page (optional) ► **315.51**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) John Friesen		Date of Receipt	
	Mailing Address 50009 Brogden		M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.80582
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		105.17	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2418.91		

B.	Full Name (Last, First, Middle Initial) John Friesen		Date of Receipt	
	Mailing Address 50009 Brogden		M M / D D / Y Y Y Y Y 1 1 / 2 0 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.80749
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		105.17	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2524.08		

C.	Full Name (Last, First, Middle Initial) John Friesen		Date of Receipt	
	Mailing Address 50009 Brogden		M M / D D / Y Y Y Y Y 1 2 / 0 4 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.80916
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		105.17	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2629.25		

SUBTOTAL of Receipts This Page (optional)	▶	315.51
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2734.42

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81582

Amount of Each Receipt this Period
105.17

B.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2839.59

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81250

Amount of Each Receipt this Period
105.17

C.

Full Name (Last, First, Middle Initial)
Celia Fuller

Mailing Address 6114 Westglen Dr

City State Zip Code
Raleigh NC 27612

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Resource/Technical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 570.21

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 0 2 / 2 0 0 9

Transaction ID: SA11AI.79070

Amount of Each Receipt this Period
40.79

SUBTOTAL of Receipts This Page (optional) ► 251.13

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 123 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Celia Fuller

Mailing Address 6114 Westglen Dr

City Raleigh State NC Zip Code 27612

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Resource/Technical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 611.00

Date of Receipt: 07 / 17 / 2009
Transaction ID: SA11AI.79241
 Amount of Each Receipt this Period: 40.79

B.

Full Name (Last, First, Middle Initial)
Celia Fuller

Mailing Address 6114 Westglen Dr

City Raleigh State NC Zip Code 27612

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Resource/Technical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 651.79

Date of Receipt: 07 / 31 / 2009
Transaction ID: SA11AI.79411
 Amount of Each Receipt this Period: 40.79

C.

Full Name (Last, First, Middle Initial)
Celia Fuller

Mailing Address 6114 Westglen Dr

City Raleigh State NC Zip Code 27612

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Resource/Technical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 692.58

Date of Receipt: 08 / 14 / 2009
Transaction ID: SA11AI.79580
 Amount of Each Receipt this Period: 40.79

SUBTOTAL of Receipts This Page (optional) ► **122.37**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 124 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Celia Fuller		Date of Receipt MM / DD / YYYY 08 / 28 / 2009
Mailing Address 6114 Westglen Dr		Transaction ID: SA11AI.79747
City Raleigh	State NC	Zip Code 27612
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.79
Name of Employer BCBSNC	Occupation Resource/Technical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 733.37	

B.

Full Name (Last, First, Middle Initial) Celia Fuller		Date of Receipt MM / DD / YYYY 09 / 11 / 2009
Mailing Address 6114 Westglen Dr		Transaction ID: SA11AI.79914
City Raleigh	State NC	Zip Code 27612
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.79
Name of Employer BCBSNC	Occupation Resource/Technical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 774.16	

C.

Full Name (Last, First, Middle Initial) Celia Fuller		Date of Receipt MM / DD / YYYY 09 / 25 / 2009
Mailing Address 6114 Westglen Dr		Transaction ID: SA11AI.80082
City Raleigh	State NC	Zip Code 27612
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.79
Name of Employer BCBSNC	Occupation Resource/Technical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 814.95	

SUBTOTAL of Receipts This Page (optional)	122.37
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 125 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Celia Fuller

Mailing Address 6114 Westglen Dr

City Raleigh State NC Zip Code 27612

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Resource/Technical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 855.74

Date of Receipt: 10 / 09 / 2009
Transaction ID: SA11AI.80249
 Amount of Each Receipt this Period: 40.79

B. Full Name (Last, First, Middle Initial)
Celia Fuller

Mailing Address 6114 Westglen Dr

City Raleigh State NC Zip Code 27612

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Resource/Technical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 896.53

Date of Receipt: 10 / 23 / 2009
Transaction ID: SA11AI.80416
 Amount of Each Receipt this Period: 40.79

C. Full Name (Last, First, Middle Initial)
Celia Fuller

Mailing Address 6114 Westglen Dr

City Raleigh State NC Zip Code 27612

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Resource/Technical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 937.32

Date of Receipt: 11 / 06 / 2009
Transaction ID: SA11AI.80583
 Amount of Each Receipt this Period: 40.79

SUBTOTAL of Receipts This Page (optional) ► 122.37

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Celia Fuller		Date of Receipt MM / DD / YYYY 11 / 20 / 2009		
	Mailing Address 6114 Westglen Dr		Transaction ID: SA11AI.80750		
	City Raleigh	State NC	Zip Code 27612	Amount of Each Receipt this Period 40.79	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Resource/Technical Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 978.11			

B.	Full Name (Last, First, Middle Initial) Celia Fuller		Date of Receipt MM / DD / YYYY 12 / 04 / 2009		
	Mailing Address 6114 Westglen Dr		Transaction ID: SA11AI.80917		
	City Raleigh	State NC	Zip Code 27612	Amount of Each Receipt this Period 40.79	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Resource/Technical Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1018.90			

C.	Full Name (Last, First, Middle Initial) Celia Fuller		Date of Receipt MM / DD / YYYY 12 / 18 / 2009		
	Mailing Address 6114 Westglen Dr		Transaction ID: SA11AI.81583		
	City Raleigh	State NC	Zip Code 27612	Amount of Each Receipt this Period 40.79	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Resource/Technical Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1059.69			

SUBTOTAL of Receipts This Page (optional)	▶	122.37
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Celia Fuller

Mailing Address 6114 Westglen Dr

City Raleigh State NC Zip Code 27612

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Resource/Technical Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1100.48

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81251

Amount of Each Receipt this Period

40.79

B.

Full Name (Last, First, Middle Initial)
Kathi Gaines

Mailing Address 603 Kingswood Drive

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 707.14

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 2 / 2 0 0 9

Transaction ID: SA11AI.79072

Amount of Each Receipt this Period

50.51

C.

Full Name (Last, First, Middle Initial)
Kathi Gaines

Mailing Address 603 Kingswood Drive

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 757.65

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.79243

Amount of Each Receipt this Period

50.51

SUBTOTAL of Receipts This Page (optional) ▶

141.81

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 128 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Kathi Gaines

Mailing Address 603 Kingswood Drive

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 808.16

Date of Receipt: 07 / 31 / 2009
Transaction ID: SA11AI.79413
Amount of Each Receipt this Period: 50.51

B.

Full Name (Last, First, Middle Initial)
Kathi Gaines

Mailing Address 603 Kingswood Drive

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 858.67

Date of Receipt: 08 / 14 / 2009
Transaction ID: SA11AI.79582
Amount of Each Receipt this Period: 50.51

C.

Full Name (Last, First, Middle Initial)
Kathi Gaines

Mailing Address 603 Kingswood Drive

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 909.18

Date of Receipt: 08 / 28 / 2009
Transaction ID: SA11AI.79749
Amount of Each Receipt this Period: 50.51

SUBTOTAL of Receipts This Page (optional) ► 151.53

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kathi Gaines		Date of Receipt
	Mailing Address 603 Kingswood Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 11 / 2009
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.79916
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.51
		<input type="text"/> 959.69	

B.	Full Name (Last, First, Middle Initial) Kathi Gaines		Date of Receipt
	Mailing Address 603 Kingswood Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 25 / 2009
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80084
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.51
		<input type="text"/> 1010.20	

C.	Full Name (Last, First, Middle Initial) Kathi Gaines		Date of Receipt
	Mailing Address 603 Kingswood Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 09 / 2009
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80251
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.51
		<input type="text"/> 1060.71	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 151.53
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 130 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Kathi Gaines		Date of Receipt MM / DD / YYYY 10 / 23 / 2009
Mailing Address 603 Kingswood Drive		Transaction ID: SA11AI.80418
City Cary	State NC	Zip Code 27513
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.51
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1111.22	

B.

Full Name (Last, First, Middle Initial) Kathi Gaines		Date of Receipt MM / DD / YYYY 11 / 06 / 2009
Mailing Address 603 Kingswood Drive		Transaction ID: SA11AI.80585
City Cary	State NC	Zip Code 27513
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.51
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1161.73	

C.

Full Name (Last, First, Middle Initial) Kathi Gaines		Date of Receipt MM / DD / YYYY 11 / 20 / 2009
Mailing Address 603 Kingswood Drive		Transaction ID: SA11AI.80752
City Cary	State NC	Zip Code 27513
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.51
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1212.24	

SUBTOTAL of Receipts This Page (optional)	151.53
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kathi Gaines		Date of Receipt	
	Mailing Address 603 Kingswood Drive		M M / D D / Y Y Y Y Y 1 2 / 0 4 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.80919
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.51	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1262.75		

B.	Full Name (Last, First, Middle Initial) Kathi Gaines		Date of Receipt	
	Mailing Address 603 Kingswood Drive		M M / D D / Y Y Y Y Y 1 2 / 1 8 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.81585
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.51	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1313.26		

C.	Full Name (Last, First, Middle Initial) Kathi Gaines		Date of Receipt	
	Mailing Address 603 Kingswood Drive		M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.81253
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.51	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1363.77		

SUBTOTAL of Receipts This Page (optional)	▶	151.53
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 132 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Lynne Garrison

Mailing Address 806 Green Passage Lane

City State Zip Code
Apex NC 27502

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
957.88

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 02 / 2009

Transaction ID: SA11AI.79074

Amount of Each Receipt this Period
68.42

B.

Full Name (Last, First, Middle Initial)
Lynne Garrison

Mailing Address 806 Green Passage Lane

City State Zip Code
Apex NC 27502

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1026.30

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 17 / 2009

Transaction ID: SA11AI.79245

Amount of Each Receipt this Period
68.42

C.

Full Name (Last, First, Middle Initial)
Lynne Garrison

Mailing Address 806 Green Passage Lane

City State Zip Code
Apex NC 27502

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1094.72

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2009

Transaction ID: SA11AI.79415

Amount of Each Receipt this Period
68.42

SUBTOTAL of Receipts This Page (optional) ► **205.26**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lynne Garrison		Date of Receipt
	Mailing Address 806 Green Passage Lane		<input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Apex	NC	27502
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation VP	Transaction ID: SA11AI.79584
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1163.14"/>	<input type="text" value="68.42"/>

B.	Full Name (Last, First, Middle Initial) Lynne Garrison		Date of Receipt
	Mailing Address 806 Green Passage Lane		<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Apex	NC	27502
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation VP	Transaction ID: SA11AI.79751
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1231.56"/>	<input type="text" value="68.42"/>

C.	Full Name (Last, First, Middle Initial) Lynne Garrison		Date of Receipt
	Mailing Address 806 Green Passage Lane		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Apex	NC	27502
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation VP	Transaction ID: SA11AI.79918
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1299.98"/>	<input type="text" value="68.42"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="205.26"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 134 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Lynne Garrison

Mailing Address 806 Green Passage Lane

City State Zip Code
Apex NC 27502

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1368.40

Date of Receipt
MM / DD / YYYY
09 / 25 / 2009

Transaction ID: SA11AI.80086

Amount of Each Receipt this Period
68.42

B.

Full Name (Last, First, Middle Initial)
Lynne Garrison

Mailing Address 806 Green Passage Lane

City State Zip Code
Apex NC 27502

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1436.82

Date of Receipt
MM / DD / YYYY
10 / 09 / 2009

Transaction ID: SA11AI.80253

Amount of Each Receipt this Period
68.42

C.

Full Name (Last, First, Middle Initial)
Lynne Garrison

Mailing Address 806 Green Passage Lane

City State Zip Code
Apex NC 27502

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1505.24

Date of Receipt
MM / DD / YYYY
10 / 23 / 2009

Transaction ID: SA11AI.80420

Amount of Each Receipt this Period
68.42

SUBTOTAL of Receipts This Page (optional) ► **205.26**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lynne Garrison		Date of Receipt
	Mailing Address 806 Green Passage Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 06 / 2009
	City	State	Zip Code
	Apex	NC	27502
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80587
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 68.42
		<input type="text"/> 1573.66	

B.	Full Name (Last, First, Middle Initial) Lynne Garrison		Date of Receipt
	Mailing Address 806 Green Passage Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 20 / 2009
	City	State	Zip Code
	Apex	NC	27502
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80754
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 68.42
		<input type="text"/> 1642.08	

C.	Full Name (Last, First, Middle Initial) Lynne Garrison		Date of Receipt
	Mailing Address 806 Green Passage Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 12 / 04 / 2009
	City	State	Zip Code
	Apex	NC	27502
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80921
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 68.42
		<input type="text"/> 1710.50	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 205.26
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lynne Garrison	Date of Receipt MM / DD / YYYY 12 / 18 / 2009
	Mailing Address 806 Green Passage Lane	Transaction ID: SA11AI.81587
	City State Zip Code Apex NC 27502	Amount of Each Receipt this Period 68.42
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1778.92	

B.	Full Name (Last, First, Middle Initial) Lynne Garrison	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 806 Green Passage Lane	Transaction ID: SA11AI.81255
	City State Zip Code Apex NC 27502	Amount of Each Receipt this Period 68.42
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1847.34	

C.	Full Name (Last, First, Middle Initial) K Patrick Getzen	Date of Receipt MM / DD / YYYY 07 / 02 / 2009
	Mailing Address 205 Chilcott	Transaction ID: SA11AI.79076
	City State Zip Code Apex NC 27502	Amount of Each Receipt this Period 86.54
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1111.31	

SUBTOTAL of Receipts This Page (optional)	223.38
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 137 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
K Patrick Getzen

Mailing Address 205 Chilcott

City State Zip Code
Apex NC 27502

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1197.85

Date of Receipt
MM / DD / YYYY
07 / 17 / 2009

Transaction ID: SA11AI.79246

Amount of Each Receipt this Period
86.54

B.

Full Name (Last, First, Middle Initial)
K Patrick Getzen

Mailing Address 205 Chilcott

City State Zip Code
Apex NC 27502

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1284.39

Date of Receipt
MM / DD / YYYY
07 / 31 / 2009

Transaction ID: SA11AI.79416

Amount of Each Receipt this Period
86.54

C.

Full Name (Last, First, Middle Initial)
K Patrick Getzen

Mailing Address 205 Chilcott

City State Zip Code
Apex NC 27502

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1370.93

Date of Receipt
MM / DD / YYYY
08 / 14 / 2009

Transaction ID: SA11AI.79585

Amount of Each Receipt this Period
86.54

SUBTOTAL of Receipts This Page (optional) ► **259.62**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 138 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
K Patrick Getzen

Mailing Address 205 Chilcott

City State Zip Code
Apex NC 27502

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1457.47

Date of Receipt
MM / DD / YYYY
08 / 28 / 2009

Transaction ID: SA11AI.79752

Amount of Each Receipt this Period
86.54

B.

Full Name (Last, First, Middle Initial)
K Patrick Getzen

Mailing Address 205 Chilcott

City State Zip Code
Apex NC 27502

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1544.01

Date of Receipt
MM / DD / YYYY
09 / 11 / 2009

Transaction ID: SA11AI.79919

Amount of Each Receipt this Period
86.54

C.

Full Name (Last, First, Middle Initial)
K Patrick Getzen

Mailing Address 205 Chilcott

City State Zip Code
Apex NC 27502

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1630.55

Date of Receipt
MM / DD / YYYY
09 / 25 / 2009

Transaction ID: SA11AI.80087

Amount of Each Receipt this Period
86.54

SUBTOTAL of Receipts This Page (optional) ► **259.62**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 139 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
K Patrick Getzen

Mailing Address 205 Chilcott

City State Zip Code
Apex NC 27502

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1717.09

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.80254

Amount of Each Receipt this Period
86.54

B.

Full Name (Last, First, Middle Initial)
K Patrick Getzen

Mailing Address 205 Chilcott

City State Zip Code
Apex NC 27502

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1803.63

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.80421

Amount of Each Receipt this Period
86.54

C.

Full Name (Last, First, Middle Initial)
K Patrick Getzen

Mailing Address 205 Chilcott

City State Zip Code
Apex NC 27502

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1890.17

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.80588

Amount of Each Receipt this Period
86.54

SUBTOTAL of Receipts This Page (optional) ► **259.62**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 140 / 394						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) K Patrick Getzen		Date of Receipt	
	Mailing Address 205 Chilcott		M M / D D / Y Y Y Y Y 1 1 / 2 0 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.80755
	Apex	NC	27502	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		86.54	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1976.71		

B.	Full Name (Last, First, Middle Initial) K Patrick Getzen		Date of Receipt	
	Mailing Address 205 Chilcott		M M / D D / Y Y Y Y Y 1 2 / 0 4 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.80922
	Apex	NC	27502	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		86.54	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2063.25		

C.	Full Name (Last, First, Middle Initial) K Patrick Getzen		Date of Receipt	
	Mailing Address 205 Chilcott		M M / D D / Y Y Y Y Y 1 2 / 1 8 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.81588
	Apex	NC	27502	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		86.54	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2149.79		

SUBTOTAL of Receipts This Page (optional)	▶	259.62
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 141 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
K Patrick Getzen

Mailing Address 205 Chilcott

City State Zip Code
Apex NC 27502

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2236.33

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81256

Amount of Each Receipt this Period

86.54

B.

Full Name (Last, First, Middle Initial)
K Ian Gordon

Mailing Address 100 Village Circle Way Apt337

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1639.25

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 2 / 2 0 0 9

Transaction ID: SA11AI.79077

Amount of Each Receipt this Period

111.54

C.

Full Name (Last, First, Middle Initial)
K Ian Gordon

Mailing Address 100 Village Circle Way Apt337

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.79

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.79247

Amount of Each Receipt this Period

111.54

SUBTOTAL of Receipts This Page (optional) ▶

309.62

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 142 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) K Ian Gordon		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
Mailing Address 100 Village Circle Way Apt337		Transaction ID: SA11AI.79417
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 111.54
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1862.33	

B.

Full Name (Last, First, Middle Initial) K Ian Gordon		Date of Receipt MM / DD / YYYY 08 / 14 / 2009
Mailing Address 100 Village Circle Way Apt337		Transaction ID: SA11AI.79586
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 111.54
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1973.87	

C.

Full Name (Last, First, Middle Initial) K Ian Gordon		Date of Receipt MM / DD / YYYY 08 / 28 / 2009
Mailing Address 100 Village Circle Way Apt337		Transaction ID: SA11AI.79753
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 111.54
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2085.41	

SUBTOTAL of Receipts This Page (optional)	334.62
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 143 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
K Ian Gordon

Mailing Address 100 Village Circle Way Apt337

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2196.95

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	1	/	2	0	0	9

Transaction ID: SA11AI.79920

Amount of Each Receipt this Period
111.54

B. Full Name (Last, First, Middle Initial)
K Ian Gordon

Mailing Address 100 Village Circle Way Apt337

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2308.49

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	9

Transaction ID: SA11AI.80088

Amount of Each Receipt this Period
111.54

C. Full Name (Last, First, Middle Initial)
K Ian Gordon

Mailing Address 100 Village Circle Way Apt337

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2420.03

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	9	/	2	0	0	9

Transaction ID: SA11AI.80255

Amount of Each Receipt this Period
111.54

SUBTOTAL of Receipts This Page (optional) ► **334.62**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 144 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) K Ian Gordon		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 9
Mailing Address 100 Village Circle Way Apt337		Transaction ID: SA11AI.80422
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 111.54
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2531.57	

B.

Full Name (Last, First, Middle Initial) K Ian Gordon		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 9
Mailing Address 100 Village Circle Way Apt337		Transaction ID: SA11AI.80589
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 111.54
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2643.11	

C.

Full Name (Last, First, Middle Initial) K Ian Gordon		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 0 / 2 0 0 9
Mailing Address 100 Village Circle Way Apt337		Transaction ID: SA11AI.80756
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 111.54
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2754.65	

SUBTOTAL of Receipts This Page (optional)	334.62
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 145 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) K Ian Gordon		Date of Receipt MM / DD / YYYY 12 / 04 / 2009
Mailing Address 100 Village Circle Way Apt337		Transaction ID: SA11AI.80923
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 111.54
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2866.19	

B.

Full Name (Last, First, Middle Initial) K Ian Gordon		Date of Receipt MM / DD / YYYY 12 / 18 / 2009
Mailing Address 100 Village Circle Way Apt337		Transaction ID: SA11AI.81589
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 111.54
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2977.73	

C.

Full Name (Last, First, Middle Initial) K Ian Gordon		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 100 Village Circle Way Apt337		Transaction ID: SA11AI.81257
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 111.54
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3089.27	

SUBTOTAL of Receipts This Page (optional)	334.62
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 146 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Laura Gorry

Mailing Address 2566 Ironwood Drive

City State Zip Code
Hickory NC 28602

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Regional Service Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 471.10

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 02 / 2009

Transaction ID: SA11AI.79078

Amount of Each Receipt this Period
33.65

B. Full Name (Last, First, Middle Initial)
Laura Gorry

Mailing Address 2566 Ironwood Drive

City State Zip Code
Hickory NC 28602

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Regional Service Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 504.75

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 17 / 2009

Transaction ID: SA11AI.79248

Amount of Each Receipt this Period
33.65

C. Full Name (Last, First, Middle Initial)
Laura Gorry

Mailing Address 2566 Ironwood Drive

City State Zip Code
Hickory NC 28602

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Regional Service Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 538.40

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 31 / 2009

Transaction ID: SA11AI.79418

Amount of Each Receipt this Period
33.65

SUBTOTAL of Receipts This Page (optional) ► 100.95

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 147 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Laura Gorry		Date of Receipt MM / DD / YYYY 08 / 14 / 2009
Mailing Address 2566 Ironwood Drive		Transaction ID: SA11AI.79587
City Hickory	State NC	Zip Code 28602
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.65
Name of Employer BCBSNC	Occupation Regional Service Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 572.05	

B.

Full Name (Last, First, Middle Initial) Laura Gorry		Date of Receipt MM / DD / YYYY 08 / 28 / 2009
Mailing Address 2566 Ironwood Drive		Transaction ID: SA11AI.79754
City Hickory	State NC	Zip Code 28602
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.65
Name of Employer BCBSNC	Occupation Regional Service Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 605.70	

C.

Full Name (Last, First, Middle Initial) Laura Gorry		Date of Receipt MM / DD / YYYY 09 / 11 / 2009
Mailing Address 2566 Ironwood Drive		Transaction ID: SA11AI.79921
City Hickory	State NC	Zip Code 28602
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.65
Name of Employer BCBSNC	Occupation Regional Service Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 639.35	

SUBTOTAL of Receipts This Page (optional)	100.95
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 148 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Laura Gorry

Mailing Address 2566 Ironwood Drive

City State Zip Code
Hickory NC 28602

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Regional Service Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 673.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 25 / 2009

Transaction ID: SA11AI.80089

Amount of Each Receipt this Period
33.65

B.

Full Name (Last, First, Middle Initial)
Laura Gorry

Mailing Address 2566 Ironwood Drive

City State Zip Code
Hickory NC 28602

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Regional Service Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 706.65

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 09 / 2009

Transaction ID: SA11AI.80256

Amount of Each Receipt this Period
33.65

C.

Full Name (Last, First, Middle Initial)
Laura Gorry

Mailing Address 2566 Ironwood Drive

City State Zip Code
Hickory NC 28602

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Regional Service Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 740.30

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 23 / 2009

Transaction ID: SA11AI.80423

Amount of Each Receipt this Period
33.65

SUBTOTAL of Receipts This Page (optional) ► **100.95**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 149 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Laura Gorry		Date of Receipt MM / DD / YYYY 11 / 06 / 2009
Mailing Address 2566 Ironwood Drive		Transaction ID: SA11AI.80590
City Hickory	State NC	Zip Code 28602
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.65
Name of Employer BCBSNC	Occupation Regional Service Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 773.95	

B.

Full Name (Last, First, Middle Initial) Laura Gorry		Date of Receipt MM / DD / YYYY 11 / 20 / 2009
Mailing Address 2566 Ironwood Drive		Transaction ID: SA11AI.80757
City Hickory	State NC	Zip Code 28602
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.65
Name of Employer BCBSNC	Occupation Regional Service Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 807.60	

C.

Full Name (Last, First, Middle Initial) Laura Gorry		Date of Receipt MM / DD / YYYY 12 / 04 / 2009
Mailing Address 2566 Ironwood Drive		Transaction ID: SA11AI.80924
City Hickory	State NC	Zip Code 28602
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.65
Name of Employer BCBSNC	Occupation Regional Service Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 841.25	

SUBTOTAL of Receipts This Page (optional)	100.95
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Laura Gorry	Date of Receipt MM / DD / YYYY 12 / 18 / 2009
	Mailing Address 2566 Ironwood Drive	Transaction ID: SA11AI.81590
	City State Zip Code Hickory NC 28602	Amount of Each Receipt this Period 33.65
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Regional Service Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 874.90

B.	Full Name (Last, First, Middle Initial) Laura Gorry	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 2566 Ironwood Drive	Transaction ID: SA11AI.81258
	City State Zip Code Hickory NC 28602	Amount of Each Receipt this Period 33.65
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Regional Service Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 908.55

C.	Full Name (Last, First, Middle Initial) Robert Greczyn	Date of Receipt MM / DD / YYYY 07 / 02 / 2009
	Mailing Address 113 Richelieu Dr.	Transaction ID: SA11AI.79079
	City State Zip Code Cary NC 27511	Amount of Each Receipt this Period 192.30
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation President & CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2692.20

SUBTOTAL of Receipts This Page (optional)	259.60
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Robert Greczyn		Date of Receipt
	Mailing Address 113 Richelieu Dr.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 07 / 17 / 2009
	City	State	Zip Code
	Cary	NC	27511
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.79249
Name of Employer BCBSNC		Occupation President & CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 192.30
		<input type="text"/> 2884.50	

B.	Full Name (Last, First, Middle Initial) Robert Greczyn		Date of Receipt
	Mailing Address 113 Richelieu Dr.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 07 / 31 / 2009
	City	State	Zip Code
	Cary	NC	27511
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.79419
Name of Employer BCBSNC		Occupation President & CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 192.30
		<input type="text"/> 3076.80	

C.	Full Name (Last, First, Middle Initial) Robert Greczyn		Date of Receipt
	Mailing Address 113 Richelieu Dr.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 08 / 14 / 2009
	City	State	Zip Code
	Cary	NC	27511
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.79588
Name of Employer BCBSNC		Occupation President & CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 192.30
		<input type="text"/> 3269.10	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 576.90
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Robert Greczyn	Date of Receipt
	Mailing Address 113 Richelieu Dr.	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 28 / 2009
	City State Zip Code Cary NC 27511	Transaction ID: SA11AI.79755
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 192.30
	Name of Employer BCBSNC Occupation President & CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 3461.40	

B.	Full Name (Last, First, Middle Initial) Robert Greczyn	Date of Receipt
	Mailing Address 113 Richelieu Dr.	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 11 / 2009
	City State Zip Code Cary NC 27511	Transaction ID: SA11AI.79922
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 192.30
	Name of Employer BCBSNC Occupation President & CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 3653.70	

C.	Full Name (Last, First, Middle Initial) Robert Greczyn	Date of Receipt
	Mailing Address 113 Richelieu Dr.	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 25 / 2009
	City State Zip Code Cary NC 27511	Transaction ID: SA11AI.80090
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 192.30
	Name of Employer BCBSNC Occupation President & CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 3846.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 576.90
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 153 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Robert Greczyn

Mailing Address 113 Richelieu Dr.

City Cary State NC Zip Code 27511

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4038.30

Date of Receipt: 10 / 09 / 2009
Transaction ID: SA11AI.80257
 Amount of Each Receipt this Period: 192.30

B.

Full Name (Last, First, Middle Initial)
Robert Greczyn

Mailing Address 113 Richelieu Dr.

City Cary State NC Zip Code 27511

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4230.60

Date of Receipt: 10 / 23 / 2009
Transaction ID: SA11AI.80424
 Amount of Each Receipt this Period: 192.30

C.

Full Name (Last, First, Middle Initial)
Robert Greczyn

Mailing Address 113 Richelieu Dr.

City Cary State NC Zip Code 27511

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4422.90

Date of Receipt: 11 / 06 / 2009
Transaction ID: SA11AI.80591
 Amount of Each Receipt this Period: 192.30

SUBTOTAL of Receipts This Page (optional) ► 576.90

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 154 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Robert Greczyn
Mailing Address 113 Richelieu Dr.
City Cary State NC Zip Code 27511
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation President & CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4615.20
Date of Receipt 11 / 20 / 2009
Transaction ID: SA11AI.80758
Amount of Each Receipt this Period 192.30

B. Full Name (Last, First, Middle Initial)
Robert Greczyn
Mailing Address 113 Richelieu Dr.
City Cary State NC Zip Code 27511
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation President & CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4807.50
Date of Receipt 12 / 04 / 2009
Transaction ID: SA11AI.80925
Amount of Each Receipt this Period 192.30

C. Full Name (Last, First, Middle Initial)
Robert Greczyn
Mailing Address 113 Richelieu Dr.
City Cary State NC Zip Code 27511
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation President & CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4999.80
Date of Receipt 12 / 18 / 2009
Transaction ID: SA11AI.81591
Amount of Each Receipt this Period 192.30

SUBTOTAL of Receipts This Page (optional) ► 576.90
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Robert Greczyn		Date of Receipt	
	Mailing Address 113 Richelieu Dr.		M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.81259
	Cary	NC	27511	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation President & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5192.10		

B.	Full Name (Last, First, Middle Initial) Mr. Darrell Grissom, II		Date of Receipt	
	Mailing Address 1105 New Hampshire Drive		M M / D D / Y Y Y Y Y 0 7 / 1 7 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.79250
	Jamestown	NC	27282	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		13.56	
Name of Employer BCBSNC		Occupation Consumer Sales Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 203.40		

C.	Full Name (Last, First, Middle Initial) Mr. Darrell Grissom, II		Date of Receipt	
	Mailing Address 1105 New Hampshire Drive		M M / D D / Y Y Y Y Y 0 7 / 3 1 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.79420
	Jamestown	NC	27282	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		13.56	
Name of Employer BCBSNC		Occupation Consumer Sales Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 216.96		

SUBTOTAL of Receipts This Page (optional)	▶	219.42
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Darrell Grissom, II	Date of Receipt MM / DD / YYYY 08 / 14 / 2009
	Mailing Address 1105 New Hampshire Drive	Transaction ID: SA11AI.79589
	City State Zip Code Jamestown NC 27282	Amount of Each Receipt this Period 13.56
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Consumer Sales Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 230.52	

B.	Full Name (Last, First, Middle Initial) Mr. Darrell Grissom, II	Date of Receipt MM / DD / YYYY 08 / 28 / 2009
	Mailing Address 1105 New Hampshire Drive	Transaction ID: SA11AI.79756
	City State Zip Code Jamestown NC 27282	Amount of Each Receipt this Period 13.56
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Consumer Sales Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 244.08	

C.	Full Name (Last, First, Middle Initial) Mr. Darrell Grissom, II	Date of Receipt MM / DD / YYYY 09 / 11 / 2009
	Mailing Address 1105 New Hampshire Drive	Transaction ID: SA11AI.79923
	City State Zip Code Jamestown NC 27282	Amount of Each Receipt this Period 13.56
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Consumer Sales Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 257.64	

SUBTOTAL of Receipts This Page (optional)	40.68
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 157 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mr. Darrell Grissom, II

Mailing Address 1105 New Hampshire Drive

City State Zip Code
Jamestown NC 27282

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Consumer Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 271.20

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 25 / 2009

Transaction ID: SA11AI.80091

Amount of Each Receipt this Period
13.56

B.

Full Name (Last, First, Middle Initial)
Mr. Darrell Grissom, II

Mailing Address 1105 New Hampshire Drive

City State Zip Code
Jamestown NC 27282

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Consumer Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 284.76

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 09 / 2009

Transaction ID: SA11AI.80258

Amount of Each Receipt this Period
13.56

C.

Full Name (Last, First, Middle Initial)
Mr. Darrell Grissom, II

Mailing Address 1105 New Hampshire Drive

City State Zip Code
Jamestown NC 27282

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Consumer Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 298.32

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 23 / 2009

Transaction ID: SA11AI.80425

Amount of Each Receipt this Period
13.56

SUBTOTAL of Receipts This Page (optional) ► **40.68**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Darrell Grissom, II		Date of Receipt
	Mailing Address 1105 New Hampshire Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 06 / 2009
	City	State	Zip Code
	Jamestown	NC	27282
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.80592
Name of Employer BCBSNC		Occupation Consumer Sales Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 311.88	<input type="text"/> 13.56

B.	Full Name (Last, First, Middle Initial) Mr. Darrell Grissom, II		Date of Receipt
	Mailing Address 1105 New Hampshire Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 20 / 2009
	City	State	Zip Code
	Jamestown	NC	27282
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.80759
Name of Employer BCBSNC		Occupation Consumer Sales Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 325.44	<input type="text"/> 13.56

C.	Full Name (Last, First, Middle Initial) Mr. Darrell Grissom, II		Date of Receipt
	Mailing Address 1105 New Hampshire Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 12 / 04 / 2009
	City	State	Zip Code
	Jamestown	NC	27282
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.80926
Name of Employer BCBSNC		Occupation Consumer Sales Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 339.00	<input type="text"/> 13.56

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 40.68
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 159 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mr. Darrell Grissom, II

Mailing Address 1105 New Hampshire Drive

City State Zip Code
Jamestown NC 27282

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Consumer Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 352.56

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81592

Amount of Each Receipt this Period
13.56

B.

Full Name (Last, First, Middle Initial)
Mr. Darrell Grissom, II

Mailing Address 1105 New Hampshire Drive

City State Zip Code
Jamestown NC 27282

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Consumer Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 366.12

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81260

Amount of Each Receipt this Period
13.56

C.

Full Name (Last, First, Middle Initial)
Danny Gunselman

Mailing Address 3018 Annandale Road

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 455.21

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 0 2 / 2 0 0 9

Transaction ID: SA11AI.79081

Amount of Each Receipt this Period
32.89

SUBTOTAL of Receipts This Page (optional) ► **60.01**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 160 / 394

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Danny Gunselman

Mailing Address 3018 Annandale Road

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. C

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 471.66

Date of Receipt M M / D D / Y Y Y Y Y
07 / 17 / 2009

Transaction ID: SA11AI.79251

Amount of Each Receipt this Period 16.45

B.

Full Name (Last, First, Middle Initial)
Danny Gunselman

Mailing Address 3018 Annandale Road

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. C

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 504.55

Date of Receipt M M / D D / Y Y Y Y Y
07 / 31 / 2009

Transaction ID: SA11AI.79421

Amount of Each Receipt this Period 32.89

C.

Full Name (Last, First, Middle Initial)
Danny Gunselman

Mailing Address 3018 Annandale Road

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. C

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 537.44

Date of Receipt M M / D D / Y Y Y Y Y
08 / 14 / 2009

Transaction ID: SA11AI.79590

Amount of Each Receipt this Period 32.89

SUBTOTAL of Receipts This Page (optional) 82.23

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Danny Gunselman		Date of Receipt	
	Mailing Address 3018 Annandale Road		M M / D D / Y Y Y Y Y 08 / 28 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79757
	Durham	NC	27705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		32.89	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		570.33		

B.	Full Name (Last, First, Middle Initial) Danny Gunselman		Date of Receipt	
	Mailing Address 3018 Annandale Road		M M / D D / Y Y Y Y Y 09 / 11 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79924
	Durham	NC	27705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		32.89	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		603.22		

C.	Full Name (Last, First, Middle Initial) Danny Gunselman		Date of Receipt	
	Mailing Address 3018 Annandale Road		M M / D D / Y Y Y Y Y 09 / 25 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.80092
	Durham	NC	27705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		32.89	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		636.11		

SUBTOTAL of Receipts This Page (optional)	▶	98.67
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 162 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Danny Gunselman

Mailing Address 3018 Annandale Road

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 669.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.80259

Amount of Each Receipt this Period
32.89

B. Full Name (Last, First, Middle Initial)
Danny Gunselman

Mailing Address 3018 Annandale Road

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 701.89

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.80426

Amount of Each Receipt this Period
32.89

C. Full Name (Last, First, Middle Initial)
Danny Gunselman

Mailing Address 3018 Annandale Road

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 734.78

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.80593

Amount of Each Receipt this Period
32.89

SUBTOTAL of Receipts This Page (optional) ► 98.67

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Danny Gunselman	Date of Receipt MM / DD / YYYY 11 / 20 / 2009
	Mailing Address 3018 Annandale Road	Transaction ID: SA11AI.80760
	City State Zip Code Durham NC 27705	Amount of Each Receipt this Period 32.89
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 767.67	

B.	Full Name (Last, First, Middle Initial) Danny Gunselman	Date of Receipt MM / DD / YYYY 12 / 04 / 2009
	Mailing Address 3018 Annandale Road	Transaction ID: SA11AI.80927
	City State Zip Code Durham NC 27705	Amount of Each Receipt this Period 32.89
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 800.56	

C.	Full Name (Last, First, Middle Initial) Danny Gunselman	Date of Receipt MM / DD / YYYY 12 / 18 / 2009
	Mailing Address 3018 Annandale Road	Transaction ID: SA11AI.81593
	City State Zip Code Durham NC 27705	Amount of Each Receipt this Period 32.89
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 833.45	

SUBTOTAL of Receipts This Page (optional)	98.67
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Danny Gunselman	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 3018 Annandale Road	Transaction ID: SA11AI.81261
	City State Zip Code Durham NC 27705	Amount of Each Receipt this Period 32.89
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 866.34	

B.	Full Name (Last, First, Middle Initial) Charles Harvey	Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 426 Holly Springs Dr	Transaction ID: SA11AI.79423
	City State Zip Code Timberlake NC 27583	Amount of Each Receipt this Period 13.21
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Inst. Designer & Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.36	

C.	Full Name (Last, First, Middle Initial) Charles Harvey	Date of Receipt MM / DD / YYYY 08 / 14 / 2009
	Mailing Address 426 Holly Springs Dr	Transaction ID: SA11AI.79592
	City State Zip Code Timberlake NC 27583	Amount of Each Receipt this Period 13.21
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Inst. Designer & Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.57	

SUBTOTAL of Receipts This Page (optional)	59.31
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Charles Harvey	Date of Receipt MM / DD / YYYY 08 / 28 / 2009
	Mailing Address 426 Holly Springs Dr	Transaction ID: SA11AI.79759
	City State Zip Code Timberlake NC 27583	Amount of Each Receipt this Period 13.21
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Inst. Designer & Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.78	

B.	Full Name (Last, First, Middle Initial) Charles Harvey	Date of Receipt MM / DD / YYYY 09 / 11 / 2009
	Mailing Address 426 Holly Springs Dr	Transaction ID: SA11AI.79926
	City State Zip Code Timberlake NC 27583	Amount of Each Receipt this Period 13.21
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Inst. Designer & Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.99	

C.	Full Name (Last, First, Middle Initial) Charles Harvey	Date of Receipt MM / DD / YYYY 09 / 25 / 2009
	Mailing Address 426 Holly Springs Dr	Transaction ID: SA11AI.80094
	City State Zip Code Timberlake NC 27583	Amount of Each Receipt this Period 13.21
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Inst. Designer & Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.20	

SUBTOTAL of Receipts This Page (optional)	39.63
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 166 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Charles Harvey

Mailing Address 426 Holly Springs Dr

City State Zip Code
Timberlake NC 27583

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Inst. Designer & Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 277.41

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.80261

Amount of Each Receipt this Period
13.21

B.

Full Name (Last, First, Middle Initial)
Charles Harvey

Mailing Address 426 Holly Springs Dr

City State Zip Code
Timberlake NC 27583

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Inst. Designer & Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.62

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.80428

Amount of Each Receipt this Period
13.21

C.

Full Name (Last, First, Middle Initial)
Charles Harvey

Mailing Address 426 Holly Springs Dr

City State Zip Code
Timberlake NC 27583

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Inst. Designer & Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 303.83

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.80595

Amount of Each Receipt this Period
13.21

SUBTOTAL of Receipts This Page (optional) ► 39.63

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 167 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Charles Harvey		Date of Receipt	
	Mailing Address 426 Holly Springs Dr		M M / D D / Y Y Y Y Y 1 1 / 2 0 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.80762
	Timberlake	NC	27583	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		13.21	
Name of Employer BCBSNC		Occupation Inst. Designer & Developer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 317.04		

B.	Full Name (Last, First, Middle Initial) Charles Harvey		Date of Receipt	
	Mailing Address 426 Holly Springs Dr		M M / D D / Y Y Y Y Y 1 2 / 0 4 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.80929
	Timberlake	NC	27583	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		13.21	
Name of Employer BCBSNC		Occupation Inst. Designer & Developer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 330.25		

C.	Full Name (Last, First, Middle Initial) Charles Harvey		Date of Receipt	
	Mailing Address 426 Holly Springs Dr		M M / D D / Y Y Y Y Y 1 2 / 1 8 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.81595
	Timberlake	NC	27583	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		13.21	
Name of Employer BCBSNC		Occupation Inst. Designer & Developer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 343.46		

SUBTOTAL of Receipts This Page (optional)	▶	39.63
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 168 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Charles Harvey

Mailing Address 426 Holly Springs Dr

City State Zip Code
Timberlake NC 27583

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Inst. Designer & Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 356.67

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81263

Amount of Each Receipt this Period
13.21

B.

Full Name (Last, First, Middle Initial)
Patricia Hatfield

Mailing Address 102 Oak Spring Court

City State Zip Code
Carrboro NC 27510

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Assoc. General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.80263

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Patricia Hatfield

Mailing Address 102 Oak Spring Court

City State Zip Code
Carrboro NC 27510

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Assoc. General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.80430

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 33.21

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 169 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Patricia Hatfield
 Mailing Address 102 Oak Spring Court
 City Carrboro State NC Zip Code 27510
 Date of Receipt: MM / DD / YYYY 11 / 06 / 2009
Transaction ID: SA11AI.80597
 Amount of Each Receipt this Period: 10.00
 FEC ID number of contributing federal political committee: C
 Name of Employer BCBSNC Occupation Assoc. General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 230.00

B. Full Name (Last, First, Middle Initial)
Patricia Hatfield
 Mailing Address 102 Oak Spring Court
 City Carrboro State NC Zip Code 27510
 Date of Receipt: MM / DD / YYYY 11 / 20 / 2009
Transaction ID: SA11AI.80764
 Amount of Each Receipt this Period: 10.00
 FEC ID number of contributing federal political committee: C
 Name of Employer BCBSNC Occupation Assoc. General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 240.00

C. Full Name (Last, First, Middle Initial)
Patricia Hatfield
 Mailing Address 102 Oak Spring Court
 City Carrboro State NC Zip Code 27510
 Date of Receipt: MM / DD / YYYY 12 / 04 / 2009
Transaction ID: SA11AI.80931
 Amount of Each Receipt this Period: 10.00
 FEC ID number of contributing federal political committee: C
 Name of Employer BCBSNC Occupation Assoc. General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 250.00

SUBTOTAL of Receipts This Page (optional) ► 30.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Patricia Hatfield		Date of Receipt
	Mailing Address 102 Oak Spring Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 1 8 / 2 0 0 9
	City	State	Zip Code
	Carrboro	NC	27510
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.81597
		Amount of Each Receipt this Period	
		<input type="text"/> 10.00	
Name of Employer BCBSNC		Occupation Assoc. General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 260.00	

B.	Full Name (Last, First, Middle Initial) Patricia Hatfield		Date of Receipt
	Mailing Address 102 Oak Spring Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 3 1 / 2 0 0 9
	City	State	Zip Code
	Carrboro	NC	27510
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.81265
		Amount of Each Receipt this Period	
		<input type="text"/> 10.00	
Name of Employer BCBSNC		Occupation Assoc. General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 270.00	

C.	Full Name (Last, First, Middle Initial) O Susan Hauck		Date of Receipt
	Mailing Address		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 7 / 0 2 / 2 0 0 9
	City	State	Zip Code
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.79087
			Amount of Each Receipt this Period
		<input type="text"/> 25.00	
Name of Employer BCBSNC		Occupation Case Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 350.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 45.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 / 394		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) O Susan Hauck		Date of Receipt
	Mailing Address		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 07 / 17 / 2009
	City State Zip Code		Transaction ID: SA11AI.79257
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <input type="text"/> 25.00
	Name of Employer BCBSNC	Occupation Case Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 375.00	

B.	Full Name (Last, First, Middle Initial) O Susan Hauck		Date of Receipt
	Mailing Address		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 07 / 31 / 2009
	City State Zip Code		Transaction ID: SA11AI.79427
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <input type="text"/> 25.00
	Name of Employer BCBSNC	Occupation Case Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 400.00	

C.	Full Name (Last, First, Middle Initial) O Susan Hauck		Date of Receipt
	Mailing Address		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 08 / 14 / 2009
	City State Zip Code		Transaction ID: SA11AI.79596
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <input type="text"/> 25.00
	Name of Employer BCBSNC	Occupation Case Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 425.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 75.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 172 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) O Susan Hauck	Date of Receipt MM / DD / YYYY 08 / 28 / 2009
	Mailing Address	Transaction ID: SA11AI.79763
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Case Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

B.	Full Name (Last, First, Middle Initial) O Susan Hauck	Date of Receipt MM / DD / YYYY 09 / 11 / 2009
	Mailing Address	Transaction ID: SA11AI.79930
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Case Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

C.	Full Name (Last, First, Middle Initial) O Susan Hauck	Date of Receipt MM / DD / YYYY 09 / 25 / 2009
	Mailing Address	Transaction ID: SA11AI.80098
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Case Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) O Susan Hauck		Date of Receipt
	Mailing Address		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code		<input type="text"/> 1 0 / <input type="text"/> 0 9 / <input type="text"/> 2 0 0 9
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80265
Name of Employer BCBSNC		Occupation Case Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 525.00	<input type="text"/> 25.00

B.	Full Name (Last, First, Middle Initial) O Susan Hauck		Date of Receipt
	Mailing Address		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code		<input type="text"/> 1 0 / <input type="text"/> 2 3 / <input type="text"/> 2 0 0 9
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80432
Name of Employer BCBSNC		Occupation Case Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 550.00	<input type="text"/> 25.00

C.	Full Name (Last, First, Middle Initial) O Susan Hauck		Date of Receipt
	Mailing Address		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code		<input type="text"/> 1 1 / <input type="text"/> 0 6 / <input type="text"/> 2 0 0 9
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80599
Name of Employer BCBSNC		Occupation Case Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 575.00	<input type="text"/> 25.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 75.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 174 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) O Susan Hauck	Date of Receipt MM / DD / YYYY 11 / 20 / 2009
	Mailing Address	Transaction ID: SA11AI.80766
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: BCBSNC Occupation: Case Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

B.	Full Name (Last, First, Middle Initial) O Susan Hauck	Date of Receipt MM / DD / YYYY 12 / 04 / 2009
	Mailing Address	Transaction ID: SA11AI.80933
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: BCBSNC Occupation: Case Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 625.00	

C.	Full Name (Last, First, Middle Initial) O Susan Hauck	Date of Receipt MM / DD / YYYY 12 / 18 / 2009
	Mailing Address	Transaction ID: SA11AI.81599
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: BCBSNC Occupation: Case Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) O Susan Hauck	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address	Transaction ID: SA11AI.81267
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Case Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

B.	Full Name (Last, First, Middle Initial) Sarah Hearn	Date of Receipt MM / DD / YYYY 07 / 02 / 2009
	Mailing Address 1181 Bowers Store Road	Transaction ID: SA11AI.79088
	City State Zip Code Siler City NC 27344	Amount of Each Receipt this Period 19.46
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 272.44	

C.	Full Name (Last, First, Middle Initial) Sarah Hearn	Date of Receipt MM / DD / YYYY 07 / 17 / 2009
	Mailing Address 1181 Bowers Store Road	Transaction ID: SA11AI.79258
	City State Zip Code Siler City NC 27344	Amount of Each Receipt this Period 19.46
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.90	

SUBTOTAL of Receipts This Page (optional)	▶	63.92
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 176 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Sarah Hearn		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
Mailing Address 1181 Bowers Store Road		Transaction ID: SA11AI.79428
City Siler City	State NC	Zip Code 27344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.46
Name of Employer BCBSNC	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 311.36	

B.

Full Name (Last, First, Middle Initial) Sarah Hearn		Date of Receipt MM / DD / YYYY 08 / 14 / 2009
Mailing Address 1181 Bowers Store Road		Transaction ID: SA11AI.79597
City Siler City	State NC	Zip Code 27344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.46
Name of Employer BCBSNC	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.82	

C.

Full Name (Last, First, Middle Initial) Sarah Hearn		Date of Receipt MM / DD / YYYY 08 / 28 / 2009
Mailing Address 1181 Bowers Store Road		Transaction ID: SA11AI.79764
City Siler City	State NC	Zip Code 27344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.46
Name of Employer BCBSNC	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.28	

SUBTOTAL of Receipts This Page (optional)	▶	58.38
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 177 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Sarah Hearn

Mailing Address 1181 Bowers Store Road

City State Zip Code
Siler City NC 27344

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 369.74

Date of Receipt
MM / DD / YYYY
09 / 11 / 2009

Transaction ID: SA11AI.79931

Amount of Each Receipt this Period
19.46

B. Full Name (Last, First, Middle Initial)
Sarah Hearn

Mailing Address 1181 Bowers Store Road

City State Zip Code
Siler City NC 27344

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 389.20

Date of Receipt
MM / DD / YYYY
09 / 25 / 2009

Transaction ID: SA11AI.80099

Amount of Each Receipt this Period
19.46

C. Full Name (Last, First, Middle Initial)
Sarah Hearn

Mailing Address 1181 Bowers Store Road

City State Zip Code
Siler City NC 27344

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 408.66

Date of Receipt
MM / DD / YYYY
10 / 09 / 2009

Transaction ID: SA11AI.80266

Amount of Each Receipt this Period
19.46

SUBTOTAL of Receipts This Page (optional) ► **58.38**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 178 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Sarah Hearn	Date of Receipt MM / DD / YYYY 10 / 23 / 2009
	Mailing Address 1181 Bowers Store Road	Transaction ID: SA11AI.80433
	City State Zip Code Siler City NC 27344	Amount of Each Receipt this Period 19.46
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 428.12	

B.	Full Name (Last, First, Middle Initial) Sarah Hearn	Date of Receipt MM / DD / YYYY 11 / 06 / 2009
	Mailing Address 1181 Bowers Store Road	Transaction ID: SA11AI.80600
	City State Zip Code Siler City NC 27344	Amount of Each Receipt this Period 19.46
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 447.58	

C.	Full Name (Last, First, Middle Initial) Sarah Hearn	Date of Receipt MM / DD / YYYY 11 / 20 / 2009
	Mailing Address 1181 Bowers Store Road	Transaction ID: SA11AI.80767
	City State Zip Code Siler City NC 27344	Amount of Each Receipt this Period 19.46
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 467.04	

SUBTOTAL of Receipts This Page (optional)	58.38
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 179 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Sarah Hearn		Date of Receipt MM / DD / YYYY 12 / 04 / 2009
Mailing Address 1181 Bowers Store Road		Transaction ID: SA11AI.80934
City Siler City	State NC	Zip Code 27344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.46
Name of Employer BCBSNC	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 486.50	

B.

Full Name (Last, First, Middle Initial) Sarah Hearn		Date of Receipt MM / DD / YYYY 12 / 18 / 2009
Mailing Address 1181 Bowers Store Road		Transaction ID: SA11AI.81600
City Siler City	State NC	Zip Code 27344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.46
Name of Employer BCBSNC	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 505.96	

C.

Full Name (Last, First, Middle Initial) Sarah Hearn		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 1181 Bowers Store Road		Transaction ID: SA11AI.81268
City Siler City	State NC	Zip Code 27344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.46
Name of Employer BCBSNC	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.42	

SUBTOTAL of Receipts This Page (optional)	58.38
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 180 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 942.34

Date of Receipt
MM / DD / YYYY
07 / 02 / 2009

Transaction ID: SA11AI.79089

Amount of Each Receipt this Period
67.31

B.

Full Name (Last, First, Middle Initial)
Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1009.65

Date of Receipt
MM / DD / YYYY
07 / 17 / 2009

Transaction ID: SA11AI.79259

Amount of Each Receipt this Period
67.31

C.

Full Name (Last, First, Middle Initial)
Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1076.96

Date of Receipt
MM / DD / YYYY
07 / 31 / 2009

Transaction ID: SA11AI.79429

Amount of Each Receipt this Period
67.31

SUBTOTAL of Receipts This Page (optional) ► **201.93**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 181 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Ms Susan Helm-Murtagh		Date of Receipt MM / DD / YYYY 08 / 14 / 2009
Mailing Address 117 Oldham Place		Transaction ID: SA11AI.79598
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 67.31
Name of Employer BCBSNC	Occupation Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1144.27	

B.

Full Name (Last, First, Middle Initial) Ms Susan Helm-Murtagh		Date of Receipt MM / DD / YYYY 08 / 28 / 2009
Mailing Address 117 Oldham Place		Transaction ID: SA11AI.79765
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 67.31
Name of Employer BCBSNC	Occupation Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1211.58	

C.

Full Name (Last, First, Middle Initial) Ms Susan Helm-Murtagh		Date of Receipt MM / DD / YYYY 09 / 11 / 2009
Mailing Address 117 Oldham Place		Transaction ID: SA11AI.79932
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 67.31
Name of Employer BCBSNC	Occupation Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1278.89	

SUBTOTAL of Receipts This Page (optional)	▶	201.93
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 182 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Ms Susan Helm-Murtagh		Date of Receipt MM / DD / YYYY 09 / 25 / 2009
Mailing Address 117 Oldham Place		Transaction ID: SA11AI.80100
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 67.31
Name of Employer BCBSNC	Occupation Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1346.20	

B.

Full Name (Last, First, Middle Initial) Ms Susan Helm-Murtagh		Date of Receipt MM / DD / YYYY 10 / 09 / 2009
Mailing Address 117 Oldham Place		Transaction ID: SA11AI.80267
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 67.31
Name of Employer BCBSNC	Occupation Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1413.51	

C.

Full Name (Last, First, Middle Initial) Ms Susan Helm-Murtagh		Date of Receipt MM / DD / YYYY 10 / 23 / 2009
Mailing Address 117 Oldham Place		Transaction ID: SA11AI.80434
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 67.31
Name of Employer BCBSNC	Occupation Resource Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1480.82	

SUBTOTAL of Receipts This Page (optional)	201.93
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 183 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1548.13

Date of Receipt
MM / DD / YYYY
11 / 06 / 2009

Transaction ID: SA11AI.80601

Amount of Each Receipt this Period
67.31

B.

Full Name (Last, First, Middle Initial)
Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1615.44

Date of Receipt
MM / DD / YYYY
11 / 20 / 2009

Transaction ID: SA11AI.80768

Amount of Each Receipt this Period
67.31

C.

Full Name (Last, First, Middle Initial)
Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1682.75

Date of Receipt
MM / DD / YYYY
12 / 04 / 2009

Transaction ID: SA11AI.80935

Amount of Each Receipt this Period
67.31

SUBTOTAL of Receipts This Page (optional) ► **201.93**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 184 / 394	
	(check only one)			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Ms Susan Helm-Murtagh		Date of Receipt																					
	Mailing Address 117 Oldham Place		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	8		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		1	8		2	0	0	9														
	City State Zip Code Chapel Hill NC 27516		Transaction ID: SA11AI.81601																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: BCBSNC Occupation: Resource Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.06		67.31																						

B.	Full Name (Last, First, Middle Initial) Ms Susan Helm-Murtagh		Date of Receipt																					
	Mailing Address 117 Oldham Place		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		3	1		2	0	0	9														
	City State Zip Code Chapel Hill NC 27516		Transaction ID: SA11AI.81269																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: BCBSNC Occupation: Resource Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1817.37		67.31																						

C.	Full Name (Last, First, Middle Initial) Steven Hicks		Date of Receipt																					
	Mailing Address 7512 Tylerton Dr		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	9		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		0	9		2	0	0	9														
	City State Zip Code Raleigh NC 27613		Transaction ID: SA11AI.80270																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: BCBSNC Occupation: Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		10.00																						

SUBTOTAL of Receipts This Page (optional)	144.62
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 185 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Steven Hicks
 Mailing Address 7512 Tylerton Dr
 City Raleigh State NC Zip Code 27613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00
 Date of Receipt 10 / 23 / 2009
Transaction ID: SA11AI.80437
 Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Steven Hicks
 Mailing Address 7512 Tylerton Dr
 City Raleigh State NC Zip Code 27613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00
 Date of Receipt 11 / 06 / 2009
Transaction ID: SA11AI.80604
 Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Steven Hicks
 Mailing Address 7512 Tylerton Dr
 City Raleigh State NC Zip Code 27613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00
 Date of Receipt 11 / 20 / 2009
Transaction ID: SA11AI.80771
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 186 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Steven Hicks
 Mailing Address 7512 Tylerton Dr
 City Raleigh State NC Zip Code 27613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00
 Date of Receipt 12 / 04 / 2009
Transaction ID: SA11AI.80938
 Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Steven Hicks
 Mailing Address 7512 Tylerton Dr
 City Raleigh State NC Zip Code 27613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00
 Date of Receipt 12 / 18 / 2009
Transaction ID: SA11AI.81604
 Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Steven Hicks
 Mailing Address 7512 Tylerton Dr
 City Raleigh State NC Zip Code 27613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00
 Date of Receipt 12 / 31 / 2009
Transaction ID: SA11AI.81272
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 187 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Ms Kathryn Higgins

Mailing Address 734 Crabtree Crossing

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Sr. Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 546.00

Date of Receipt: 07 / 02 / 2009
Transaction ID: SA11AI.79093
 Amount of Each Receipt this Period: 39.00

B.

Full Name (Last, First, Middle Initial)
Ms Kathryn Higgins

Mailing Address 734 Crabtree Crossing

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Sr. Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt: 07 / 17 / 2009
Transaction ID: SA11AI.79263
 Amount of Each Receipt this Period: 39.00

C.

Full Name (Last, First, Middle Initial)
Ms Kathryn Higgins

Mailing Address 734 Crabtree Crossing

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Sr. Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 624.00

Date of Receipt: 07 / 31 / 2009
Transaction ID: SA11AI.79433
 Amount of Each Receipt this Period: 39.00

SUBTOTAL of Receipts This Page (optional) ► **117.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 188 / 394	
	(check only one)			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Ms Kathryn Higgins		Date of Receipt																					
	Mailing Address 734 Crabtree Crossing		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	4		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	8		1	4		2	0	0	9														
	City State Zip Code Cary NC 27513		Transaction ID: SA11AI.79602																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: BCBSNC Occupation: Sr. Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 663.00		39.00																						

B.	Full Name (Last, First, Middle Initial) Ms Kathryn Higgins		Date of Receipt																					
	Mailing Address 734 Crabtree Crossing		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	8		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	8		2	8		2	0	0	9														
	City State Zip Code Cary NC 27513		Transaction ID: SA11AI.79769																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: BCBSNC Occupation: Sr. Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 702.00		39.00																						

C.	Full Name (Last, First, Middle Initial) Ms Kathryn Higgins		Date of Receipt																					
	Mailing Address 734 Crabtree Crossing		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	1		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	9		1	1		2	0	0	9														
	City State Zip Code Cary NC 27513		Transaction ID: SA11AI.79936																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: BCBSNC Occupation: Sr. Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 741.00		39.00																						

SUBTOTAL of Receipts This Page (optional)	117.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 / 394		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Ms Kathryn Higgins		Date of Receipt MM / DD / YYYY 09 / 25 / 2009		
	Mailing Address 734 Crabtree Crossing		Transaction ID: SA11AI.80104		
	City Cary	State NC	Zip Code 27513	Amount of Each Receipt this Period 39.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Sr. Director	Aggregate Year-to-Date 780.00		

B.	Full Name (Last, First, Middle Initial) Ms Kathryn Higgins		Date of Receipt MM / DD / YYYY 10 / 09 / 2009		
	Mailing Address 734 Crabtree Crossing		Transaction ID: SA11AI.80271		
	City Cary	State NC	Zip Code 27513	Amount of Each Receipt this Period 39.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Sr. Director	Aggregate Year-to-Date 819.00		

C.	Full Name (Last, First, Middle Initial) Ms Kathryn Higgins		Date of Receipt MM / DD / YYYY 10 / 23 / 2009		
	Mailing Address 734 Crabtree Crossing		Transaction ID: SA11AI.80438		
	City Cary	State NC	Zip Code 27513	Amount of Each Receipt this Period 39.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Sr. Director	Aggregate Year-to-Date 858.00		

SUBTOTAL of Receipts This Page (optional)	▶	117.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 190 / 394
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Ms Kathryn Higgins		Date of Receipt MM / DD / YYYY 11 / 06 / 2009	
	Mailing Address 734 Crabtree Crossing		Transaction ID: SA11AI.80605	
	City	State	Zip Code	Amount of Each Receipt this Period
	Cary	NC	27513	39.00
	FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC		Occupation Sr. Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 897.00		

B.	Full Name (Last, First, Middle Initial) Ms Kathryn Higgins		Date of Receipt MM / DD / YYYY 11 / 20 / 2009	
	Mailing Address 734 Crabtree Crossing		Transaction ID: SA11AI.80772	
	City	State	Zip Code	Amount of Each Receipt this Period
	Cary	NC	27513	39.00
	FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC		Occupation Sr. Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 936.00		

C.	Full Name (Last, First, Middle Initial) Ms Kathryn Higgins		Date of Receipt MM / DD / YYYY 12 / 04 / 2009	
	Mailing Address 734 Crabtree Crossing		Transaction ID: SA11AI.80939	
	City	State	Zip Code	Amount of Each Receipt this Period
	Cary	NC	27513	39.00
	FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC		Occupation Sr. Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 975.00		

SUBTOTAL of Receipts This Page (optional)	▶	117.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 191 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Ms Kathryn Higgins	Date of Receipt MM / DD / YYYY 12 / 18 / 2009
	Mailing Address 734 Crabtree Crossing	Transaction ID: SA11AI.81605
	City State Zip Code Cary NC 27513	Amount of Each Receipt this Period 39.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Sr. Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1014.00	

B.	Full Name (Last, First, Middle Initial) Ms Kathryn Higgins	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 734 Crabtree Crossing	Transaction ID: SA11AI.81273
	City State Zip Code Cary NC 27513	Amount of Each Receipt this Period 39.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Sr. Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1053.00	

C.	Full Name (Last, First, Middle Initial) Stanley Jenkins	Date of Receipt MM / DD / YYYY 07 / 02 / 2009
	Mailing Address 5436 Chimney Swift Dr	Transaction ID: SA11AI.79099
	City State Zip Code Wake Forest NC 27587	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Enterprise Architech Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional)	98.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 192 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Stanley Jenkins
 Mailing Address 5436 Chimney Swift Dr
 City Wake Forest State NC Zip Code 27587
 Date of Receipt 07 / 17 / 2009
Transaction ID: SA11AI.79269
 Amount of Each Receipt this Period 20.00
 FEC ID number of contributing federal political committee. C
 Name of Employer BCBSNC Occupation Enterprise Architech
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

B. Full Name (Last, First, Middle Initial)
Stanley Jenkins
 Mailing Address 5436 Chimney Swift Dr
 City Wake Forest State NC Zip Code 27587
 Date of Receipt 07 / 31 / 2009
Transaction ID: SA11AI.79439
 Amount of Each Receipt this Period 20.00
 FEC ID number of contributing federal political committee. C
 Name of Employer BCBSNC Occupation Enterprise Architech
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

C. Full Name (Last, First, Middle Initial)
Stanley Jenkins
 Mailing Address 5436 Chimney Swift Dr
 City Wake Forest State NC Zip Code 27587
 Date of Receipt 08 / 14 / 2009
Transaction ID: SA11AI.79608
 Amount of Each Receipt this Period 20.00
 FEC ID number of contributing federal political committee. C
 Name of Employer BCBSNC Occupation Enterprise Architech
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

SUBTOTAL of Receipts This Page (optional) ► 60.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 193 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Stanley Jenkins

Mailing Address 5436 Chimney Swift Dr

City State Zip Code
Wake Forest NC 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Enterprise Architech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2009

Transaction ID: SA11AI.79775

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Stanley Jenkins

Mailing Address 5436 Chimney Swift Dr

City State Zip Code
Wake Forest NC 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Enterprise Architech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt
MM / DD / YYYY
09 / 11 / 2009

Transaction ID: SA11AI.79942

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Stanley Jenkins

Mailing Address 5436 Chimney Swift Dr

City State Zip Code
Wake Forest NC 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Enterprise Architech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
09 / 25 / 2009

Transaction ID: SA11AI.80110

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 194 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Stanley Jenkins

Mailing Address 5436 Chimney Swift Dr

City State Zip Code
Wake Forest NC 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Enterprise Architech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	9	/	2	0	0	9

Transaction ID: SA11AI.80277

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Stanley Jenkins

Mailing Address 5436 Chimney Swift Dr

City State Zip Code
Wake Forest NC 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Enterprise Architech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	9

Transaction ID: SA11AI.80444

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Stanley Jenkins

Mailing Address 5436 Chimney Swift Dr

City State Zip Code
Wake Forest NC 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Enterprise Architech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	0	9

Transaction ID: SA11AI.80611

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **60.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 195 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Stanley Jenkins
 Mailing Address 5436 Chimney Swift Dr
 City State Zip Code
Wake Forest NC 27587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Enterprise Architech
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00
 Date of Receipt M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 9
Transaction ID: SA11AI.80778
 Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Stanley Jenkins
 Mailing Address 5436 Chimney Swift Dr
 City State Zip Code
Wake Forest NC 27587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Enterprise Architech
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00
 Date of Receipt M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 9
Transaction ID: SA11AI.80945
 Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Stanley Jenkins
 Mailing Address 5436 Chimney Swift Dr
 City State Zip Code
Wake Forest NC 27587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Enterprise Architech
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00
 Date of Receipt M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 9
Transaction ID: SA11AI.81611
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 196 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Stanley Jenkins

Mailing Address 5436 Chimney Swift Dr

City State Zip Code
Wake Forest NC 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Enterprise Architech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81279

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Melissa Kempf

Mailing Address 372 Winter Green Road

City State Zip Code
Timberlake NC 27583

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Senior Business Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.67

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.80949

Amount of Each Receipt this Period
8.46

C. Full Name (Last, First, Middle Initial)
Melissa Kempf

Mailing Address 372 Winter Green Road

City State Zip Code
Timberlake NC 27583

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Senior Business Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 214.13

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81614

Amount of Each Receipt this Period
8.46

SUBTOTAL of Receipts This Page (optional) ► 36.92

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 197 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Melissa Kempf		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 372 Winter Green Road		Transaction ID: SA11AI.81282		
	City Timberlake	State NC	Zip Code 27583	Amount of Each Receipt this Period 8.46	
	FEC ID number of contributing federal political committee. C		Name of Employer BCBSNC		
Occupation Senior Business Consultant		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 222.59					

B.	Full Name (Last, First, Middle Initial) Mr. James Kenley, Sr.		Date of Receipt MM / DD / YYYY 07 / 02 / 2009		
	Mailing Address 4670 Elmhurst Drive NE		Transaction ID: SA11AI.79104		
	City Hickory	State NC	Zip Code 28601	Amount of Each Receipt this Period 85.62	
	FEC ID number of contributing federal political committee. C		Name of Employer BCBSNC		
Occupation VP		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 1187.13					

C.	Full Name (Last, First, Middle Initial) Mr. James Kenley, Sr.		Date of Receipt MM / DD / YYYY 07 / 17 / 2009		
	Mailing Address 4670 Elmhurst Drive NE		Transaction ID: SA11AI.79274		
	City Hickory	State NC	Zip Code 28601	Amount of Each Receipt this Period 85.62	
	FEC ID number of contributing federal political committee. C		Name of Employer BCBSNC		
Occupation VP		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 1272.75					

SUBTOTAL of Receipts This Page (optional)	179.70
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 198 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. James Kenley, Sr.
Mailing Address 4670 Elmhurst Drive NE

City Hickory	State NC	Zip Code 28601
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FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC	Occupation VP
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1358.37

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2009

Transaction ID: SA11AI.79444
 Amount of Each Receipt this Period
85.62

B. Full Name (Last, First, Middle Initial)
Mr. James Kenley, Sr.
Mailing Address 4670 Elmhurst Drive NE

City Hickory	State NC	Zip Code 28601
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FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1443.99

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 14 / 2009

Transaction ID: SA11AI.79613
 Amount of Each Receipt this Period
85.62

C. Full Name (Last, First, Middle Initial)
Mr. James Kenley, Sr.
Mailing Address 4670 Elmhurst Drive NE

City Hickory	State NC	Zip Code 28601
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1529.61

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 28 / 2009

Transaction ID: SA11AI.79780
 Amount of Each Receipt this Period
85.62

SUBTOTAL of Receipts This Page (optional)	▶	256.86
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 199 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mr. James Kenley, Sr.

Mailing Address 4670 Elmhurst Drive NE

City State Zip Code
Hickory NC 28601

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1615.23

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 11 / 2009

Transaction ID: SA11AI.79947

Amount of Each Receipt this Period
85.62

B.

Full Name (Last, First, Middle Initial)
Mr. James Kenley, Sr.

Mailing Address 4670 Elmhurst Drive NE

City State Zip Code
Hickory NC 28601

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1700.85

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 25 / 2009

Transaction ID: SA11AI.80115

Amount of Each Receipt this Period
85.62

C.

Full Name (Last, First, Middle Initial)
Mr. James Kenley, Sr.

Mailing Address 4670 Elmhurst Drive NE

City State Zip Code
Hickory NC 28601

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1786.47

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 09 / 2009

Transaction ID: SA11AI.80282

Amount of Each Receipt this Period
85.62

SUBTOTAL of Receipts This Page (optional) ► **256.86**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 200 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. James Kenley, Sr.
Mailing Address 4670 Elmhurst Drive NE

City	State	Zip Code
Hickory	NC	28601

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1872.09

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	9

Transaction ID: SA11AI.80449
Amount of Each Receipt this Period
85.62

B. Full Name (Last, First, Middle Initial)
Mr. James Kenley, Sr.
Mailing Address 4670 Elmhurst Drive NE

City	State	Zip Code
Hickory	NC	28601

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1957.71

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	0	9

Transaction ID: SA11AI.80616
Amount of Each Receipt this Period
85.62

C. Full Name (Last, First, Middle Initial)
Mr. James Kenley, Sr.
Mailing Address 4670 Elmhurst Drive NE

City	State	Zip Code
Hickory	NC	28601

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2043.33

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	0	/	2	0	0	9

Transaction ID: SA11AI.80783
Amount of Each Receipt this Period
85.62

SUBTOTAL of Receipts This Page (optional)	▶	256.86
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 201 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. James Kenley, Sr.		Date of Receipt																					
	Mailing Address 4670 Elmhurst Drive NE		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	4	/	2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2	/	0	4	/	2	0	0	9														
City State Zip Code Hickory NC 28601		Transaction ID: SA11AI.80950																						
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.62																						
Name of Employer BCBSNC		Occupation VP																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2128.95																						

B.	Full Name (Last, First, Middle Initial) Mr. James Kenley, Sr.		Date of Receipt																					
	Mailing Address 4670 Elmhurst Drive NE		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>1</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	8	/	2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2	/	1	8	/	2	0	0	9														
City State Zip Code Hickory NC 28601		Transaction ID: SA11AI.81615																						
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.62																						
Name of Employer BCBSNC		Occupation VP																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2214.57																						

C.	Full Name (Last, First, Middle Initial) Mr. James Kenley, Sr.		Date of Receipt																					
	Mailing Address 4670 Elmhurst Drive NE		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	3	1	/	2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2	/	3	1	/	2	0	0	9														
City State Zip Code Hickory NC 28601		Transaction ID: SA11AI.81283																						
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.62																						
Name of Employer BCBSNC		Occupation VP																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2300.19																						

SUBTOTAL of Receipts This Page (optional) ▶

256.86

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 202 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Sean Kerns		Date of Receipt MM / DD / YYYY 10 / 09 / 2009
Mailing Address		Transaction ID: SA11AI.80283
City State Zip Code		Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C	Occupation	
Name of Employer BCBSNC	Aggregate Year-to-Date ▼ 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Sean Kerns		Date of Receipt MM / DD / YYYY 10 / 23 / 2009
Mailing Address		Transaction ID: SA11AI.80450
City State Zip Code		Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C	Occupation	
Name of Employer BCBSNC	Aggregate Year-to-Date ▼ 220.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Sean Kerns		Date of Receipt MM / DD / YYYY 11 / 06 / 2009
Mailing Address		Transaction ID: SA11AI.80617
City State Zip Code		Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C	Occupation	
Name of Employer BCBSNC	Aggregate Year-to-Date ▼ 230.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	30.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 203 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Sean Kerns		Date of Receipt MM / DD / YYYY 11 / 20 / 2009
Mailing Address		Transaction ID: SA11AI.80784
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer BCBSNC	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

B.

Full Name (Last, First, Middle Initial) Sean Kerns		Date of Receipt MM / DD / YYYY 12 / 04 / 2009
Mailing Address		Transaction ID: SA11AI.80951
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer BCBSNC	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Sean Kerns		Date of Receipt MM / DD / YYYY 12 / 18 / 2009
Mailing Address		Transaction ID: SA11AI.81616
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer BCBSNC	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	▶	30.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 204 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Sean Kerns

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: SA11AI.81284

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
M Eugenie Komives

Mailing Address 3518 Bluestone Ct.

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation
Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1301.58

Date of Receipt
MM / DD / YYYY
07 / 02 / 2009

Transaction ID: SA11AI.79106

Amount of Each Receipt this Period
92.97

C.

Full Name (Last, First, Middle Initial)
M Eugenie Komives

Mailing Address 3518 Bluestone Ct.

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation
Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1394.55

Date of Receipt
MM / DD / YYYY
07 / 17 / 2009

Transaction ID: SA11AI.79276

Amount of Each Receipt this Period
92.97

SUBTOTAL of Receipts This Page (optional) ► 195.94

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 205 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) M Eugenie Komives		Date of Receipt MM / DD / YYYY 07 / 31 / 2009	
Mailing Address 3518 Bluestone Ct.		Transaction ID: SA11AI.79446	
City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 92.97
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation Medical Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1487.52		

B.

Full Name (Last, First, Middle Initial) M Eugenie Komives		Date of Receipt MM / DD / YYYY 08 / 14 / 2009	
Mailing Address 3518 Bluestone Ct.		Transaction ID: SA11AI.79615	
City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 92.97
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation Medical Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1580.49		

C.

Full Name (Last, First, Middle Initial) M Eugenie Komives		Date of Receipt MM / DD / YYYY 08 / 28 / 2009	
Mailing Address 3518 Bluestone Ct.		Transaction ID: SA11AI.79782	
City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 92.97
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation Medical Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1673.46		

SUBTOTAL of Receipts This Page (optional)	▶	278.91
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 206 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
M Eugenie Komives

Mailing Address 3518 Bluestone Ct.

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1766.43

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 11 / 2009

Transaction ID: SA11AI.79949

Amount of Each Receipt this Period
92.97

B. Full Name (Last, First, Middle Initial)
M Eugenie Komives

Mailing Address 3518 Bluestone Ct.

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1859.40

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 25 / 2009

Transaction ID: SA11AI.80117

Amount of Each Receipt this Period
92.97

C. Full Name (Last, First, Middle Initial)
M Eugenie Komives

Mailing Address 3518 Bluestone Ct.

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1952.37

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 09 / 2009

Transaction ID: SA11AI.80284

Amount of Each Receipt this Period
92.97

SUBTOTAL of Receipts This Page (optional) ► **278.91**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 207 / 394						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) M Eugenie Komives		Date of Receipt																					
	Mailing Address 3518 Bluestone Ct.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	3		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		2	3		2	0	0	9														
	City State Zip Code Chapel Hill NC 27514		Transaction ID: SA11AI.80451																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 92.97																						
Name of Employer BCBSNC Occupation Medical Director		Aggregate Year-to-Date ▼ 2045.34																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

B.	Full Name (Last, First, Middle Initial) M Eugenie Komives		Date of Receipt																					
	Mailing Address 3518 Bluestone Ct.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	6		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1		0	6		2	0	0	9														
	City State Zip Code Chapel Hill NC 27514		Transaction ID: SA11AI.80618																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 92.97																						
Name of Employer BCBSNC Occupation Medical Director		Aggregate Year-to-Date ▼ 2138.31																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

C.	Full Name (Last, First, Middle Initial) M Eugenie Komives		Date of Receipt																					
	Mailing Address 3518 Bluestone Ct.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	0		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1		2	0		2	0	0	9														
	City State Zip Code Chapel Hill NC 27514		Transaction ID: SA11AI.80785																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 92.97																						
Name of Employer BCBSNC Occupation Medical Director		Aggregate Year-to-Date ▼ 2231.28																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

SUBTOTAL of Receipts This Page (optional)	▶	278.91
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 208 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) M Eugenie Komives		Date of Receipt MM / DD / YYYY 12 / 04 / 2009
Mailing Address 3518 Bluestone Ct.		Transaction ID: SA11AI.80952
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 92.97
Name of Employer BCBSNC	Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2324.25	

B.

Full Name (Last, First, Middle Initial) M Eugenie Komives		Date of Receipt MM / DD / YYYY 12 / 18 / 2009
Mailing Address 3518 Bluestone Ct.		Transaction ID: SA11AI.81617
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 92.97
Name of Employer BCBSNC	Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2417.22	

C.

Full Name (Last, First, Middle Initial) M Eugenie Komives		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 3518 Bluestone Ct.		Transaction ID: SA11AI.81285
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 92.97
Name of Employer BCBSNC	Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2510.19	

SUBTOTAL of Receipts This Page (optional)	▶	278.91
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 209 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Theresa Kroliczak		Date of Receipt	
	Mailing Address 117 Aycock ave		M M / D D / Y Y Y Y Y 07 / 02 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79108
	Burlington	NC	27215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		63.46	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		888.44		

B.	Full Name (Last, First, Middle Initial) Theresa Kroliczak		Date of Receipt	
	Mailing Address 117 Aycock ave		M M / D D / Y Y Y Y Y 07 / 17 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79278
	Burlington	NC	27215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		63.46	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		951.90		

C.	Full Name (Last, First, Middle Initial) Theresa Kroliczak		Date of Receipt	
	Mailing Address 117 Aycock ave		M M / D D / Y Y Y Y Y 07 / 31 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79448
	Burlington	NC	27215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		63.46	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1015.36		

SUBTOTAL of Receipts This Page (optional)	▶	190.38
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 210 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Theresa Kroliczak

Mailing Address 117 Aycock ave

City State Zip Code
Burlington NC 27215

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1078.82

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.79617

Amount of Each Receipt this Period
63.46

B.

Full Name (Last, First, Middle Initial)
Theresa Kroliczak

Mailing Address 117 Aycock ave

City State Zip Code
Burlington NC 27215

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1142.28

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.79784

Amount of Each Receipt this Period
63.46

C.

Full Name (Last, First, Middle Initial)
Theresa Kroliczak

Mailing Address 117 Aycock ave

City State Zip Code
Burlington NC 27215

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1205.74

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.79951

Amount of Each Receipt this Period
63.46

SUBTOTAL of Receipts This Page (optional) ► 190.38

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 211 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Theresa Kroliczak

Mailing Address 117 Aycock ave

City Burlington State NC Zip Code 27215

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1269.20

Date of Receipt: 09 / 25 / 2009
Transaction ID: SA11AI.80119
 Amount of Each Receipt this Period: 63.46

B.

Full Name (Last, First, Middle Initial)
Theresa Kroliczak

Mailing Address 117 Aycock ave

City Burlington State NC Zip Code 27215

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1332.66

Date of Receipt: 10 / 09 / 2009
Transaction ID: SA11AI.80286
 Amount of Each Receipt this Period: 63.46

C.

Full Name (Last, First, Middle Initial)
Theresa Kroliczak

Mailing Address 117 Aycock ave

City Burlington State NC Zip Code 27215

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1396.12

Date of Receipt: 10 / 23 / 2009
Transaction ID: SA11AI.80453
 Amount of Each Receipt this Period: 63.46

SUBTOTAL of Receipts This Page (optional) ► **190.38**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 212 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Theresa Kroliczak

Mailing Address 117 Aycock ave

City State Zip Code
Burlington NC 27215

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1459.58

Date of Receipt
MM / DD / YYYY
11 / 06 / 2009

Transaction ID: SA11AI.80620

Amount of Each Receipt this Period
63.46

B.

Full Name (Last, First, Middle Initial)
Theresa Kroliczak

Mailing Address 117 Aycock ave

City State Zip Code
Burlington NC 27215

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1523.04

Date of Receipt
MM / DD / YYYY
11 / 20 / 2009

Transaction ID: SA11AI.80787

Amount of Each Receipt this Period
63.46

C.

Full Name (Last, First, Middle Initial)
Theresa Kroliczak

Mailing Address 117 Aycock ave

City State Zip Code
Burlington NC 27215

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1586.50

Date of Receipt
MM / DD / YYYY
12 / 04 / 2009

Transaction ID: SA11AI.80954

Amount of Each Receipt this Period
63.46

SUBTOTAL of Receipts This Page (optional) ► **190.38**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 213 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Theresa Krolczak		Date of Receipt	
	Mailing Address 117 Aycock ave		M M / D D / Y Y Y Y Y 1 2 / 1 8 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.81619
	Burlington	NC	27215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		63.46	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1649.96		

B.	Full Name (Last, First, Middle Initial) Theresa Krolczak		Date of Receipt	
	Mailing Address 117 Aycock ave		M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.81287
	Burlington	NC	27215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		63.46	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1713.42		

C.	Full Name (Last, First, Middle Initial) E George Lassiter		Date of Receipt	
	Mailing Address 1106 Bellenden Drive		M M / D D / Y Y Y Y Y 0 7 / 0 2 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.79109
	Durham	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		84.62	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1173.13		

SUBTOTAL of Receipts This Page (optional)	▶	211.54
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 214 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) E George Lassiter		Date of Receipt	
	Mailing Address 1106 Bellenden Drive		M M / D D / Y Y Y Y Y 07 / 17 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79279
	Durham	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		84.62	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1257.75		

B.	Full Name (Last, First, Middle Initial) E George Lassiter		Date of Receipt	
	Mailing Address 1106 Bellenden Drive		M M / D D / Y Y Y Y Y 07 / 31 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79449
	Durham	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		84.62	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1342.37		

C.	Full Name (Last, First, Middle Initial) E George Lassiter		Date of Receipt	
	Mailing Address 1106 Bellenden Drive		M M / D D / Y Y Y Y Y 08 / 14 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79618
	Durham	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		84.62	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1426.99		

SUBTOTAL of Receipts This Page (optional) ▶

253.86

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 215 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) E George Lassiter		Date of Receipt MM / DD / YYYY 08 / 28 / 2009
Mailing Address 1106 Bellenden Drive		Transaction ID: SA11AI.79785
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 84.62
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1511.61	

B.

Full Name (Last, First, Middle Initial) E George Lassiter		Date of Receipt MM / DD / YYYY 09 / 11 / 2009
Mailing Address 1106 Bellenden Drive		Transaction ID: SA11AI.79952
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 84.62
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1596.23	

C.

Full Name (Last, First, Middle Initial) E George Lassiter		Date of Receipt MM / DD / YYYY 09 / 25 / 2009
Mailing Address 1106 Bellenden Drive		Transaction ID: SA11AI.80120
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 84.62
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1680.85	

SUBTOTAL of Receipts This Page (optional)	253.86
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 216 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) E George Lassiter		Date of Receipt MM / DD / YYYY 10 / 09 / 2009	
Mailing Address 1106 Bellenden Drive		Transaction ID: SA11AI.80287	
City Durham	State NC	Zip Code 27713	Amount of Each Receipt this Period 84.62
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1765.47		

B.

Full Name (Last, First, Middle Initial) E George Lassiter		Date of Receipt MM / DD / YYYY 10 / 23 / 2009	
Mailing Address 1106 Bellenden Drive		Transaction ID: SA11AI.80454	
City Durham	State NC	Zip Code 27713	Amount of Each Receipt this Period 84.62
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1850.09		

C.

Full Name (Last, First, Middle Initial) E George Lassiter		Date of Receipt MM / DD / YYYY 11 / 06 / 2009	
Mailing Address 1106 Bellenden Drive		Transaction ID: SA11AI.80621	
City Durham	State NC	Zip Code 27713	Amount of Each Receipt this Period 84.62
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1934.71		

SUBTOTAL of Receipts This Page (optional)	253.86
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 217 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
E George Lassiter

Mailing Address 1106 Bellenden Drive

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2019.33

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.80788

Amount of Each Receipt this Period
84.62

B.

Full Name (Last, First, Middle Initial)
E George Lassiter

Mailing Address 1106 Bellenden Drive

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2103.95

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.80955

Amount of Each Receipt this Period
84.62

C.

Full Name (Last, First, Middle Initial)
E George Lassiter

Mailing Address 1106 Bellenden Drive

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2188.57

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81620

Amount of Each Receipt this Period
84.62

SUBTOTAL of Receipts This Page (optional) ►

253.86

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 218 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) E George Lassiter		Date of Receipt MM / DD / YYYY 12 / 31 / 2009	
Mailing Address 1106 Bellenden Drive		Transaction ID: SA11AI.81288	
City Durham	State NC	Zip Code 27713	Amount of Each Receipt this Period 84.62
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2273.19		

B.

Full Name (Last, First, Middle Initial) Kenneth Lerner		Date of Receipt MM / DD / YYYY 12 / 31 / 2009	
Mailing Address		Transaction ID: SA11AI.81289	
City	State	Zip Code	Amount of Each Receipt this Period 15.00
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

C.

Full Name (Last, First, Middle Initial) Dr. Dayna Lucas		Date of Receipt MM / DD / YYYY 07 / 02 / 2009	
Mailing Address 121 Breckenridge Pl		Transaction ID: SA11AI.79111	
City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation Medical Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional)	▶	124.62
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 219 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 17 / 2009

Transaction ID: SA11AI.79281

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2009

Transaction ID: SA11AI.79451

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 14 / 2009

Transaction ID: SA11AI.79620

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 75.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 220 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Dr. Dayna Lucas		Date of Receipt MM / DD / YYYY 08 / 28 / 2009
Mailing Address 121 Breckenridge Pl		Transaction ID: SA11AI.79787
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer BCBSNC	Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

B.

Full Name (Last, First, Middle Initial) Dr. Dayna Lucas		Date of Receipt MM / DD / YYYY 09 / 11 / 2009
Mailing Address 121 Breckenridge Pl		Transaction ID: SA11AI.79954
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer BCBSNC	Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

C.

Full Name (Last, First, Middle Initial) Dr. Dayna Lucas		Date of Receipt MM / DD / YYYY 09 / 25 / 2009
Mailing Address 121 Breckenridge Pl		Transaction ID: SA11AI.80122
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer BCBSNC	Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 221 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.80289

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.80456

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 575.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.80623

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ▶ **75.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 222 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
11 / 20 / 2009

Transaction ID: SA11AI.80790

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt
MM / DD / YYYY
12 / 04 / 2009

Transaction ID: SA11AI.80957

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
MM / DD / YYYY
12 / 18 / 2009

Transaction ID: SA11AI.81622

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **75.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 223 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: SA11AI.81290

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Debra MacClennan

Mailing Address 400 Lakeshore Lane

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1077.16

Date of Receipt
MM / DD / YYYY
07 / 02 / 2009

Transaction ID: SA11AI.79113

Amount of Each Receipt this Period
76.94

C.

Full Name (Last, First, Middle Initial)
Debra MacClennan

Mailing Address 400 Lakeshore Lane

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1154.10

Date of Receipt
MM / DD / YYYY
07 / 17 / 2009

Transaction ID: SA11AI.79283

Amount of Each Receipt this Period
76.94

SUBTOTAL of Receipts This Page (optional) ► **178.88**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 224 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Debra MacClennan		Date of Receipt MM / DD / YYYY 07 / 31 / 2009		
	Mailing Address 400 Lakeshore Lane		Transaction ID: SA11AI.79453		
	City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 76.94	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1231.04		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Debra MacClennan		Date of Receipt MM / DD / YYYY 08 / 14 / 2009		
	Mailing Address 400 Lakeshore Lane		Transaction ID: SA11AI.79622		
	City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 76.94	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1307.98		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Debra MacClennan		Date of Receipt MM / DD / YYYY 08 / 28 / 2009		
	Mailing Address 400 Lakeshore Lane		Transaction ID: SA11AI.79789		
	City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 76.94	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1384.92		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional) ▶

230.82

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 225 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Debra MacClennan

Mailing Address 400 Lakeshore Lane

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1461.86

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 11 / 2009

Transaction ID: SA11AI.79956

Amount of Each Receipt this Period
76.94

B.

Full Name (Last, First, Middle Initial)
Debra MacClennan

Mailing Address 400 Lakeshore Lane

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1538.80

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 25 / 2009

Transaction ID: SA11AI.80124

Amount of Each Receipt this Period
76.94

C.

Full Name (Last, First, Middle Initial)
Joe McDowell

Mailing Address 165 Farmington Road

City State Zip Code
Grimesland NC 27837

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 02 / 2009

Transaction ID: SA11AI.79116

Amount of Each Receipt this Period
16.00

SUBTOTAL of Receipts This Page (optional) ► **169.88**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 226 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Joe McDowell

Mailing Address 165 Farmington Road

City State Zip Code
Grimesland NC 27837

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
07 / 17 / 2009

Transaction ID: SA11AI.79286

Amount of Each Receipt this Period
16.00

B.

Full Name (Last, First, Middle Initial)
Joe McDowell

Mailing Address 165 Farmington Road

City State Zip Code
Grimesland NC 27837

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 256.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2009

Transaction ID: SA11AI.79456

Amount of Each Receipt this Period
16.00

C.

Full Name (Last, First, Middle Initial)
Joe McDowell

Mailing Address 165 Farmington Road

City State Zip Code
Grimesland NC 27837

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 272.00

Date of Receipt
MM / DD / YYYY
08 / 14 / 2009

Transaction ID: SA11AI.79625

Amount of Each Receipt this Period
16.00

SUBTOTAL of Receipts This Page (optional) ► 48.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 227 / 394 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Joe McDowell</p> <p>Mailing Address 165 Farmington Road</p> <p>City State Zip Code Grimesland NC 27837</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC Occupation Regional Sales Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 288.00</p>	<p>Date of Receipt 08 / 28 / 2009</p> <p>Transaction ID: SA11AI.79792</p> <p>Amount of Each Receipt this Period 16.00</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) Joe McDowell</p> <p>Mailing Address 165 Farmington Road</p> <p>City State Zip Code Grimesland NC 27837</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC Occupation Regional Sales Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 304.00</p>	<p>Date of Receipt 09 / 11 / 2009</p> <p>Transaction ID: SA11AI.79959</p> <p>Amount of Each Receipt this Period 16.00</p>
---	--

<p>C. Full Name (Last, First, Middle Initial) Joe McDowell</p> <p>Mailing Address 165 Farmington Road</p> <p>City State Zip Code Grimesland NC 27837</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC Occupation Regional Sales Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 320.00</p>	<p>Date of Receipt 09 / 25 / 2009</p> <p>Transaction ID: SA11AI.80127</p> <p>Amount of Each Receipt this Period 16.00</p>
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SUBTOTAL of Receipts This Page (optional)	48.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 228 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Joe McDowell

Mailing Address 165 Farmington Road

City State Zip Code
Grimesland NC 27837

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.80293

Amount of Each Receipt this Period
16.00

B.

Full Name (Last, First, Middle Initial)
Joe McDowell

Mailing Address 165 Farmington Road

City State Zip Code
Grimesland NC 27837

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 352.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.80460

Amount of Each Receipt this Period
16.00

C.

Full Name (Last, First, Middle Initial)
Joe McDowell

Mailing Address 165 Farmington Road

City State Zip Code
Grimesland NC 27837

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 368.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.80627

Amount of Each Receipt this Period
16.00

SUBTOTAL of Receipts This Page (optional) ► **48.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 229 / 394

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Joe McDowell

Mailing Address 165 Farmington Road

City State Zip Code
Grimesland NC 27837

FEC ID number of contributing federal political committee. C

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 384.00

Date of Receipt MM / DD / YYYY
11 / 20 / 2009

Transaction ID: SA11AI.80794

Amount of Each Receipt this Period 16.00

B.

Full Name (Last, First, Middle Initial)
Joe McDowell

Mailing Address 165 Farmington Road

City State Zip Code
Grimesland NC 27837

FEC ID number of contributing federal political committee. C

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt MM / DD / YYYY
12 / 04 / 2009

Transaction ID: SA11AI.80961

Amount of Each Receipt this Period 16.00

C.

Full Name (Last, First, Middle Initial)
Joe McDowell

Mailing Address 165 Farmington Road

City State Zip Code
Grimesland NC 27837

FEC ID number of contributing federal political committee. C

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.00

Date of Receipt MM / DD / YYYY
12 / 18 / 2009

Transaction ID: SA11AI.81626

Amount of Each Receipt this Period 16.00

SUBTOTAL of Receipts This Page (optional) 48.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 230 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Joe McDowell

Mailing Address 165 Farmington Road

City State Zip Code
Grimesland NC 27837

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 432.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81294

Amount of Each Receipt this Period
16.00

B. Full Name (Last, First, Middle Initial)
Lynn McNeal

Mailing Address 185 Swansea Lane

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1346.24

Date of Receipt
M M / D D / Y Y Y Y
0 7 / 0 2 / 2 0 0 9

Transaction ID: SA11AI.79119

Amount of Each Receipt this Period
96.16

C. Full Name (Last, First, Middle Initial)
Lynn McNeal

Mailing Address 185 Swansea Lane

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1442.40

Date of Receipt
M M / D D / Y Y Y Y
0 7 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.79289

Amount of Each Receipt this Period
96.16

SUBTOTAL of Receipts This Page (optional) ► **208.32**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 231 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Lynn McNeal
Mailing Address 185 Swansea Lane
City Chapel Hill State NC Zip Code 27516
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1538.56
Date of Receipt 07 / 31 / 2009
Transaction ID: SA11AI.79459
Amount of Each Receipt this Period 96.16

B. Full Name (Last, First, Middle Initial)
Lynn McNeal
Mailing Address 185 Swansea Lane
City Chapel Hill State NC Zip Code 27516
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1634.72
Date of Receipt 08 / 14 / 2009
Transaction ID: SA11AI.79628
Amount of Each Receipt this Period 96.16

C. Full Name (Last, First, Middle Initial)
Lynn McNeal
Mailing Address 185 Swansea Lane
City Chapel Hill State NC Zip Code 27516
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1730.88
Date of Receipt 08 / 28 / 2009
Transaction ID: SA11AI.79795
Amount of Each Receipt this Period 96.16

SUBTOTAL of Receipts This Page (optional) ► 288.48
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 232 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lynn McNeal		Date of Receipt	
	Mailing Address 185 Swansea Lane		M M / D D / Y Y Y Y Y 09 / 11 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79962
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		96.16	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1827.04		

B.	Full Name (Last, First, Middle Initial) Lynn McNeal		Date of Receipt	
	Mailing Address 185 Swansea Lane		M M / D D / Y Y Y Y Y 09 / 25 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.80130
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		96.16	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1923.20		

C.	Full Name (Last, First, Middle Initial) Lynn McNeal		Date of Receipt	
	Mailing Address 185 Swansea Lane		M M / D D / Y Y Y Y Y 10 / 09 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.80296
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		96.16	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2019.36		

SUBTOTAL of Receipts This Page (optional)	▶	288.48
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 233 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Lynn McNeal

Mailing Address 185 Swansea Lane

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2115.52

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.80463

Amount of Each Receipt this Period
96.16

B.

Full Name (Last, First, Middle Initial)
Lynn McNeal

Mailing Address 185 Swansea Lane

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2211.68

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.80630

Amount of Each Receipt this Period
96.16

C.

Full Name (Last, First, Middle Initial)
Lynn McNeal

Mailing Address 185 Swansea Lane

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2307.84

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.80797

Amount of Each Receipt this Period
96.16

SUBTOTAL of Receipts This Page (optional) ► **288.48**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 234 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Lynn McNeal		Date of Receipt MM / DD / YYYY 12 / 04 / 2009	
Mailing Address 185 Swansea Lane		Transaction ID: SA11AI.80964	
City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 96.16
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2404.00		

B.

Full Name (Last, First, Middle Initial) Lynn McNeal		Date of Receipt MM / DD / YYYY 12 / 18 / 2009	
Mailing Address 185 Swansea Lane		Transaction ID: SA11AI.81629	
City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 96.16
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.16		

C.

Full Name (Last, First, Middle Initial) Lynn McNeal		Date of Receipt MM / DD / YYYY 12 / 31 / 2009	
Mailing Address 185 Swansea Lane		Transaction ID: SA11AI.81297	
City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 96.16
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2596.32		

SUBTOTAL of Receipts This Page (optional)	▶	288.48
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 235 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt MM / DD / YYYY 07 / 02 / 2009
Mailing Address 105 Songbird Lane		Transaction ID: SA11AI.79121
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.14
Name of Employer BCBSNC	Occupation Sr. OD Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.61	

B.

Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt MM / DD / YYYY 07 / 17 / 2009
Mailing Address 105 Songbird Lane		Transaction ID: SA11AI.79291
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.14
Name of Employer BCBSNC	Occupation Sr. OD Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 284.75	

C.

Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
Mailing Address 105 Songbird Lane		Transaction ID: SA11AI.79461
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.14
Name of Employer BCBSNC	Occupation Sr. OD Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 303.89	

SUBTOTAL of Receipts This Page (optional)	57.42
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 236 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt MM / DD / YYYY 08 / 14 / 2009
Mailing Address 105 Songbird Lane		Transaction ID: SA11AI.79630
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 13.39
Name of Employer BCBSNC	Occupation Sr. OD Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 317.28	

B.

Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt MM / DD / YYYY 08 / 28 / 2009
Mailing Address 105 Songbird Lane		Transaction ID: SA11AI.79797
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.14
Name of Employer BCBSNC	Occupation Sr. OD Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.42	

C.

Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt MM / DD / YYYY 09 / 11 / 2009
Mailing Address 105 Songbird Lane		Transaction ID: SA11AI.79964
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.14
Name of Employer BCBSNC	Occupation Sr. OD Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.56	

SUBTOTAL of Receipts This Page (optional)	▶	51.67
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 237 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Shirley Michl

Mailing Address 105 Songbird Lane

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Sr. OD Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 374.70

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 25 / 2009

Transaction ID: SA11AI.80132

Amount of Each Receipt this Period
19.14

B. Full Name (Last, First, Middle Initial)
Shirley Michl

Mailing Address 105 Songbird Lane

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Sr. OD Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 393.84

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 09 / 2009

Transaction ID: SA11AI.80298

Amount of Each Receipt this Period
19.14

C. Full Name (Last, First, Middle Initial)
Shirley Michl

Mailing Address 105 Songbird Lane

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Sr. OD Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 412.98

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 23 / 2009

Transaction ID: SA11AI.80465

Amount of Each Receipt this Period
19.14

SUBTOTAL of Receipts This Page (optional) ► 57.42

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 238 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt MM / DD / YYYY 11 / 06 / 2009
Mailing Address 105 Songbird Lane		Transaction ID: SA11AI.80632
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.14
Name of Employer BCBSNC	Occupation Sr. OD Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 432.12	

B.

Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt MM / DD / YYYY 11 / 20 / 2009
Mailing Address 105 Songbird Lane		Transaction ID: SA11AI.80799
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.14
Name of Employer BCBSNC	Occupation Sr. OD Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 451.26	

C.

Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt MM / DD / YYYY 12 / 04 / 2009
Mailing Address 105 Songbird Lane		Transaction ID: SA11AI.80966
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.14
Name of Employer BCBSNC	Occupation Sr. OD Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 470.40	

SUBTOTAL of Receipts This Page (optional)	57.42
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 239 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Shirley Michl
Mailing Address 105 Songbird Lane
City Chapel Hill State NC Zip Code 27514
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Sr. OD Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 489.54
Date of Receipt 12 / 18 / 2009
Transaction ID: SA11AI.81631
Amount of Each Receipt this Period 19.14

B. Full Name (Last, First, Middle Initial)
Shirley Michl
Mailing Address 105 Songbird Lane
City Chapel Hill State NC Zip Code 27514
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Sr. OD Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 508.68
Date of Receipt 12 / 31 / 2009
Transaction ID: SA11AI.81299
Amount of Each Receipt this Period 19.14

C. Full Name (Last, First, Middle Initial)
Kathryn Millican
Mailing Address 1632 Lorraine Road
City Raleigh State NC Zip Code 27607
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.86
Date of Receipt 07 / 02 / 2009
Transaction ID: SA11AI.79122
Amount of Each Receipt this Period 18.99

SUBTOTAL of Receipts This Page (optional) ► 57.27
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 240 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Kathryn Millican		Date of Receipt MM / DD / YYYY 07 / 17 / 2009
Mailing Address 1632 Lorraine Road		Transaction ID: SA11AI.79292
City Raleigh	State NC	Zip Code 27607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.99
Name of Employer BCBSNC	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 284.85	

B.

Full Name (Last, First, Middle Initial) Kathryn Millican		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
Mailing Address 1632 Lorraine Road		Transaction ID: SA11AI.79462
City Raleigh	State NC	Zip Code 27607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.99
Name of Employer BCBSNC	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 303.84	

C.

Full Name (Last, First, Middle Initial) Kathryn Millican		Date of Receipt MM / DD / YYYY 08 / 14 / 2009
Mailing Address 1632 Lorraine Road		Transaction ID: SA11AI.79631
City Raleigh	State NC	Zip Code 27607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.99
Name of Employer BCBSNC	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 322.83	

SUBTOTAL of Receipts This Page (optional)	▶	56.97
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 241 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Kathryn Millican
Mailing Address 1632 Lorraine Road
City Raleigh State NC Zip Code 27607
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 341.82
Date of Receipt 08 / 28 / 2009
Transaction ID: SA11AI.79798
Amount of Each Receipt this Period 18.99

B. Full Name (Last, First, Middle Initial)
Kathryn Millican
Mailing Address 1632 Lorraine Road
City Raleigh State NC Zip Code 27607
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.81
Date of Receipt 09 / 11 / 2009
Transaction ID: SA11AI.79965
Amount of Each Receipt this Period 18.99

C. Full Name (Last, First, Middle Initial)
Kathryn Millican
Mailing Address 1632 Lorraine Road
City Raleigh State NC Zip Code 27607
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 379.80
Date of Receipt 09 / 25 / 2009
Transaction ID: SA11AI.80133
Amount of Each Receipt this Period 18.99

SUBTOTAL of Receipts This Page (optional) ► 56.97
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 242 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Kathryn Millican
Mailing Address 1632 Lorraine Road
City Raleigh State NC Zip Code 27607
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 398.79
Date of Receipt 10 / 09 / 2009
Transaction ID: SA11AI.80299
Amount of Each Receipt this Period 18.99

B. Full Name (Last, First, Middle Initial)
Kathryn Millican
Mailing Address 1632 Lorraine Road
City Raleigh State NC Zip Code 27607
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 417.78
Date of Receipt 10 / 23 / 2009
Transaction ID: SA11AI.80466
Amount of Each Receipt this Period 18.99

C. Full Name (Last, First, Middle Initial)
Kathryn Millican
Mailing Address 1632 Lorraine Road
City Raleigh State NC Zip Code 27607
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 436.77
Date of Receipt 11 / 06 / 2009
Transaction ID: SA11AI.80633
Amount of Each Receipt this Period 18.99

SUBTOTAL of Receipts This Page (optional) ► 56.97
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 243 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Kathryn Millican</p> <p>Mailing Address 1632 Lorraine Road</p> <p>City Raleigh State NC Zip Code 27607</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC Occupation Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 455.76</p>	<p>Date of Receipt MM / DD / YYYY 11 / 20 / 2009</p> <p>Transaction ID: SA11AI.80800</p> <p>Amount of Each Receipt this Period 18.99</p>
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<p>B. Full Name (Last, First, Middle Initial) Kathryn Millican</p> <p>Mailing Address 1632 Lorraine Road</p> <p>City Raleigh State NC Zip Code 27607</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC Occupation Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 474.75</p>	<p>Date of Receipt MM / DD / YYYY 12 / 04 / 2009</p> <p>Transaction ID: SA11AI.80967</p> <p>Amount of Each Receipt this Period 18.99</p>
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<p>C. Full Name (Last, First, Middle Initial) Kathryn Millican</p> <p>Mailing Address 1632 Lorraine Road</p> <p>City Raleigh State NC Zip Code 27607</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC Occupation Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 493.74</p>	<p>Date of Receipt MM / DD / YYYY 12 / 18 / 2009</p> <p>Transaction ID: SA11AI.81632</p> <p>Amount of Each Receipt this Period 18.99</p>
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<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>56.97</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 244 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Kathryn Millican

Mailing Address 1632 Lorraine Road

City Raleigh State NC Zip Code 27607

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 512.73

Date of Receipt: 12 / 31 / 2009
Transaction ID: SA11AI.81300
 Amount of Each Receipt this Period: 18.99

B.

Full Name (Last, First, Middle Initial)
Barbara Morales-Burke

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt: 10 / 09 / 2009
Transaction ID: SA11AI.80301
 Amount of Each Receipt this Period: 77.00

C.

Full Name (Last, First, Middle Initial)
Barbara Morales-Burke

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 308.00

Date of Receipt: 10 / 23 / 2009
Transaction ID: SA11AI.80468
 Amount of Each Receipt this Period: 77.00

SUBTOTAL of Receipts This Page (optional) ► 172.99

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 245 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Barbara Morales-Burke	Date of Receipt MM / DD / YYYY 11 / 06 / 2009
	Mailing Address	Transaction ID: SA11AI.80635
	City State Zip Code	Amount of Each Receipt this Period 77.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

B.	Full Name (Last, First, Middle Initial) Barbara Morales-Burke	Date of Receipt MM / DD / YYYY 11 / 20 / 2009
	Mailing Address	Transaction ID: SA11AI.80802
	City State Zip Code	Amount of Each Receipt this Period 77.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00	

C.	Full Name (Last, First, Middle Initial) Barbara Morales-Burke	Date of Receipt MM / DD / YYYY 12 / 04 / 2009
	Mailing Address	Transaction ID: SA11AI.80969
	City State Zip Code	Amount of Each Receipt this Period 77.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 539.00	

SUBTOTAL of Receipts This Page (optional)	231.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 246 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Barbara Morales-Burke

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 616.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81634

Amount of Each Receipt this Period 77.00

B. Full Name (Last, First, Middle Initial)
Barbara Morales-Burke

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 693.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81302

Amount of Each Receipt this Period 77.00

C. Full Name (Last, First, Middle Initial)
J Heidi Musser

Mailing Address 104 Academy Rove Dr.

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1386.56

Date of Receipt
M M / D D / Y Y Y Y
0 7 / 0 2 / 2 0 0 9

Transaction ID: SA11AI.79125

Amount of Each Receipt this Period 99.04

SUBTOTAL of Receipts This Page (optional) ► **253.04**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 247 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) J Heidi Musser		Date of Receipt MM / DD / YYYY 07 / 17 / 2009		
	Mailing Address 104 Academy Rove Dr.		Transaction ID: SA11AI.79295		
	City Durham	State NC	Zip Code 27705	Amount of Each Receipt this Period 99.04	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
1485.60

B.	Full Name (Last, First, Middle Initial) J Heidi Musser		Date of Receipt MM / DD / YYYY 07 / 31 / 2009		
	Mailing Address 104 Academy Rove Dr.		Transaction ID: SA11AI.79465		
	City Durham	State NC	Zip Code 27705	Amount of Each Receipt this Period 99.04	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
1584.64

C.	Full Name (Last, First, Middle Initial) Linda Oaster		Date of Receipt MM / DD / YYYY 07 / 02 / 2009		
	Mailing Address 6008 Crystal Spring Ct		Transaction ID: SA11AI.79128		
	City Greensboro	State NC	Zip Code 27410	Amount of Each Receipt this Period 19.23	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
269.22

SUBTOTAL of Receipts This Page (optional)	▶	217.31
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 248 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Linda Oaster

Mailing Address 6008 Crystal Spring Ct

City State Zip Code
Greensboro NC 27410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 288.45

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 17 / 2009

Transaction ID: SA11AI.79298

Amount of Each Receipt this Period

19.23

B.

Full Name (Last, First, Middle Initial)
Linda Oaster

Mailing Address 6008 Crystal Spring Ct

City State Zip Code
Greensboro NC 27410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 307.68

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2009

Transaction ID: SA11AI.79468

Amount of Each Receipt this Period

19.23

C.

Full Name (Last, First, Middle Initial)
Linda Oaster

Mailing Address 6008 Crystal Spring Ct

City State Zip Code
Greensboro NC 27410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 326.91

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 14 / 2009

Transaction ID: SA11AI.79636

Amount of Each Receipt this Period

19.23

SUBTOTAL of Receipts This Page (optional)

57.69

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 249 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Linda Oaster		Date of Receipt
	Mailing Address 6008 Crystal Spring Ct		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 28 / 2009
	City	State	Zip Code
	Greensboro	NC	27410
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.79803
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 19.23
		<input type="text"/> 346.14	

B.	Full Name (Last, First, Middle Initial) Linda Oaster		Date of Receipt
	Mailing Address 6008 Crystal Spring Ct		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 11 / 2009
	City	State	Zip Code
	Greensboro	NC	27410
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.79971
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 19.23
		<input type="text"/> 365.37	

C.	Full Name (Last, First, Middle Initial) Linda Oaster		Date of Receipt
	Mailing Address 6008 Crystal Spring Ct		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 25 / 2009
	City	State	Zip Code
	Greensboro	NC	27410
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80139
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 19.23
		<input type="text"/> 384.60	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 57.69
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 250 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Linda Oaster		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 9 / 2 0 0 9
Mailing Address 6008 Crystal Spring Ct		Transaction ID: SA11AI.80305
City Greensboro	State NC	Zip Code 27410
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 403.83	

B.

Full Name (Last, First, Middle Initial) Linda Oaster		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 9
Mailing Address 6008 Crystal Spring Ct		Transaction ID: SA11AI.80472
City Greensboro	State NC	Zip Code 27410
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	

C.

Full Name (Last, First, Middle Initial) Linda Oaster		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 9
Mailing Address 6008 Crystal Spring Ct		Transaction ID: SA11AI.80639
City Greensboro	State NC	Zip Code 27410
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 442.29	

SUBTOTAL of Receipts This Page (optional)	▶	57.69
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 251 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Linda Oaster		Date of Receipt MM / DD / YYYY 11 / 20 / 2009
Mailing Address 6008 Crystal Spring Ct		Transaction ID: SA11AI.80806
City Greensboro	State NC	Zip Code 27410
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	

B.

Full Name (Last, First, Middle Initial) Linda Oaster		Date of Receipt MM / DD / YYYY 12 / 04 / 2009
Mailing Address 6008 Crystal Spring Ct		Transaction ID: SA11AI.80973
City Greensboro	State NC	Zip Code 27410
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.75	

C.

Full Name (Last, First, Middle Initial) Linda Oaster		Date of Receipt MM / DD / YYYY 12 / 18 / 2009
Mailing Address 6008 Crystal Spring Ct		Transaction ID: SA11AI.81638
City Greensboro	State NC	Zip Code 27410
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	

SUBTOTAL of Receipts This Page (optional)	▶	57.69
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 252 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Linda Oaster

Mailing Address 6008 Crystal Spring Ct

City Greensboro State NC Zip Code 27410

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 519.21

Date of Receipt: MM / DD / YYYY 12 / 31 / 2009

Transaction ID: SA11AI.81306

Amount of Each Receipt this Period 19.23

B.

Full Name (Last, First, Middle Initial)
Maureen OConnor

Mailing Address 104 Beeston Ct.

City Morrisville State NC Zip Code 27560

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2692.20

Date of Receipt: MM / DD / YYYY 07 / 02 / 2009

Transaction ID: SA11AI.79129

Amount of Each Receipt this Period 192.30

C.

Full Name (Last, First, Middle Initial)
Maureen OConnor

Mailing Address 104 Beeston Ct.

City Morrisville State NC Zip Code 27560

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2884.50

Date of Receipt: MM / DD / YYYY 07 / 17 / 2009

Transaction ID: SA11AI.79299

Amount of Each Receipt this Period 192.30

SUBTOTAL of Receipts This Page (optional) ▶ **403.83**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 253 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Maureen OConnor
 Mailing Address 104 Beeston Ct.
 City State Zip Code
 Morrisville NC 27560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3076.80
 Date of Receipt MM / DD / YYYY
 07 / 31 / 2009
Transaction ID: SA11AI.79469
 Amount of Each Receipt this Period 192.30

B. Full Name (Last, First, Middle Initial)
Maureen OConnor
 Mailing Address 104 Beeston Ct.
 City State Zip Code
 Morrisville NC 27560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3269.10
 Date of Receipt MM / DD / YYYY
 08 / 14 / 2009
Transaction ID: SA11AI.79637
 Amount of Each Receipt this Period 192.30

C. Full Name (Last, First, Middle Initial)
Maureen OConnor
 Mailing Address 104 Beeston Ct.
 City State Zip Code
 Morrisville NC 27560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3461.40
 Date of Receipt MM / DD / YYYY
 08 / 28 / 2009
Transaction ID: SA11AI.79804
 Amount of Each Receipt this Period 192.30

SUBTOTAL of Receipts This Page (optional) ► 576.90
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 254 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Maureen OConnor

Mailing Address 104 Beeston Ct.

City State Zip Code
Morrisville NC 27560

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3653.70

Date of Receipt
MM / DD / YYYY
09 / 11 / 2009

Transaction ID: SA11AI.79972

Amount of Each Receipt this Period
192.30

B. Full Name (Last, First, Middle Initial)
Maureen OConnor

Mailing Address 104 Beeston Ct.

City State Zip Code
Morrisville NC 27560

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3846.00

Date of Receipt
MM / DD / YYYY
09 / 25 / 2009

Transaction ID: SA11AI.80140

Amount of Each Receipt this Period
192.30

C. Full Name (Last, First, Middle Initial)
Maureen OConnor

Mailing Address 104 Beeston Ct.

City State Zip Code
Morrisville NC 27560

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4038.30

Date of Receipt
MM / DD / YYYY
10 / 09 / 2009

Transaction ID: SA11AI.80306

Amount of Each Receipt this Period
192.30

SUBTOTAL of Receipts This Page (optional) ► **576.90**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 255 / 394						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Maureen OConnor		Date of Receipt	
	Mailing Address 104 Beeston Ct.		M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.80473
	Morrisville	NC	27560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		4230.60		

B.	Full Name (Last, First, Middle Initial) Maureen OConnor		Date of Receipt	
	Mailing Address 104 Beeston Ct.		M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.80640
	Morrisville	NC	27560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		4422.90		

C.	Full Name (Last, First, Middle Initial) Maureen OConnor		Date of Receipt	
	Mailing Address 104 Beeston Ct.		M M / D D / Y Y Y Y Y 1 1 / 2 0 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.80807
	Morrisville	NC	27560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		4615.20		

SUBTOTAL of Receipts This Page (optional)	▶	576.90
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 256 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Maureen OConnor

Mailing Address 104 Beeston Ct.

City State Zip Code
Morrisville NC 27560

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC SVP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4807.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.80974

Amount of Each Receipt this Period

192.30

B.

Full Name (Last, First, Middle Initial)
Maureen OConnor

Mailing Address 104 Beeston Ct.

City State Zip Code
Morrisville NC 27560

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC SVP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4999.80

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81639

Amount of Each Receipt this Period

192.30

C.

Full Name (Last, First, Middle Initial)
Maureen OConnor

Mailing Address 104 Beeston Ct.

City State Zip Code
Morrisville NC 27560

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC SVP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5192.10

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81307

Amount of Each Receipt this Period

192.30

SUBTOTAL of Receipts This Page (optional)

576.90

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 257 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Fara Palumbo		Date of Receipt MM / DD / YYYY 07 / 02 / 2009
Mailing Address 1000 Gloucester Ct		Transaction ID: SA11AI.79131
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 77.88
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1061.52	

B.

Full Name (Last, First, Middle Initial) Fara Palumbo		Date of Receipt MM / DD / YYYY 07 / 17 / 2009
Mailing Address 1000 Gloucester Ct		Transaction ID: SA11AI.79301
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 77.88
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1139.40	

C.

Full Name (Last, First, Middle Initial) Fara Palumbo		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
Mailing Address 1000 Gloucester Ct		Transaction ID: SA11AI.79471
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 77.88
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1217.28	

SUBTOTAL of Receipts This Page (optional)	▶	233.64
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 258 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Fara Palumbo		Date of Receipt MM / DD / YYYY 08 / 14 / 2009
Mailing Address 1000 Gloucester Ct		Transaction ID: SA11AI.79639
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 77.88
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1295.16	

B.

Full Name (Last, First, Middle Initial) Fara Palumbo		Date of Receipt MM / DD / YYYY 08 / 28 / 2009
Mailing Address 1000 Gloucester Ct		Transaction ID: SA11AI.79806
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 77.88
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1373.04	

C.

Full Name (Last, First, Middle Initial) Fara Palumbo		Date of Receipt MM / DD / YYYY 09 / 11 / 2009
Mailing Address 1000 Gloucester Ct		Transaction ID: SA11AI.79974
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 77.88
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1450.92	

SUBTOTAL of Receipts This Page (optional)	233.64
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 259 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Fara Palumbo

Mailing Address 1000 Gloucester Ct

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1528.80

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 5 / 2 0 0 9

Transaction ID: SA11AI.80142

Amount of Each Receipt this Period

77.88

B.

Full Name (Last, First, Middle Initial)
Fara Palumbo

Mailing Address 1000 Gloucester Ct

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1606.68

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.80308

Amount of Each Receipt this Period

77.88

C.

Full Name (Last, First, Middle Initial)
Fara Palumbo

Mailing Address 1000 Gloucester Ct

City State Zip Code
Chapel Hill NC 27516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1684.56

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.80475

Amount of Each Receipt this Period

77.88

SUBTOTAL of Receipts This Page (optional) ▶

233.64

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 260 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Fara Palumbo		Date of Receipt MM / DD / YYYY 11 / 06 / 2009
Mailing Address 1000 Gloucester Ct		Transaction ID: SA11AI.80642
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 77.88
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1762.44	

B.

Full Name (Last, First, Middle Initial) Fara Palumbo		Date of Receipt MM / DD / YYYY 11 / 20 / 2009
Mailing Address 1000 Gloucester Ct		Transaction ID: SA11AI.80809
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 77.88
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1840.32	

C.

Full Name (Last, First, Middle Initial) Fara Palumbo		Date of Receipt MM / DD / YYYY 12 / 04 / 2009
Mailing Address 1000 Gloucester Ct		Transaction ID: SA11AI.80976
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 77.88
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1918.20	

SUBTOTAL of Receipts This Page (optional)	▶	233.64
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 261 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Fara Palumbo		Date of Receipt MM / DD / YYYY 12 / 18 / 2009
Mailing Address 1000 Gloucester Ct		Transaction ID: SA11AI.81641
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 77.88
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1996.08	

B.

Full Name (Last, First, Middle Initial) Fara Palumbo		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 1000 Gloucester Ct		Transaction ID: SA11AI.81309
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 77.88
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2073.96	

C.

Full Name (Last, First, Middle Initial) Michael J Parkerson		Date of Receipt MM / DD / YYYY 07 / 02 / 2009
Mailing Address 7504 Clayshant Court		Transaction ID: SA11AI.79133
City Wake Forest	State NC	Zip Code 27587
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	▶	180.76
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 262 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michael J Parkerson

Mailing Address 7504 Clayshant Court

City Wake Forest State NC Zip Code 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 07 / 17 / 2009
Transaction ID: SA11AI.79303
 Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
Michael J Parkerson

Mailing Address 7504 Clayshant Court

City Wake Forest State NC Zip Code 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 07 / 31 / 2009
Transaction ID: SA11AI.79473
 Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial)
Michael J Parkerson

Mailing Address 7504 Clayshant Court

City Wake Forest State NC Zip Code 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt: 08 / 14 / 2009
Transaction ID: SA11AI.79641
 Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ► 75.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 263 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michael J Parkerson
Mailing Address 7504 Clayshant Court

City State Zip Code
Wake Forest NC 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	8	/	2	0	0	9

Transaction ID: SA11AI.79808
 Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Michael J Parkerson
Mailing Address 7504 Clayshant Court

City State Zip Code
Wake Forest NC 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	1	/	2	0	0	9

Transaction ID: SA11AI.79976
 Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Michael J Parkerson
Mailing Address 7504 Clayshant Court

City State Zip Code
Wake Forest NC 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	9

Transaction ID: SA11AI.80144
 Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **75.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 264 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michael J Parkerson
Mailing Address 7504 Clayshant Court

City State Zip Code
Wake Forest NC 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	9	/	2	0	0	9

Transaction ID: SA11AI.80310
 Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Michael J Parkerson
Mailing Address 7504 Clayshant Court

City State Zip Code
Wake Forest NC 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	9

Transaction ID: SA11AI.80477
 Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Michael J Parkerson
Mailing Address 7504 Clayshant Court

City State Zip Code
Wake Forest NC 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	0	9

Transaction ID: SA11AI.80644
 Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **75.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 265 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michael J Parkerson

Mailing Address 7504 Clayshant Court

City State Zip Code
Wake Forest NC 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	0	/	2	0	0	9

Transaction ID: SA11AI.80811

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Michael J Parkerson

Mailing Address 7504 Clayshant Court

City State Zip Code
Wake Forest NC 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	4	/	2	0	0	9

Transaction ID: SA11AI.80978

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Michael J Parkerson

Mailing Address 7504 Clayshant Court

City State Zip Code
Wake Forest NC 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	8	/	2	0	0	9

Transaction ID: SA11AI.81643

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **75.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 266 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Michael J Parkerson	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 7504 Clayshant Court	Transaction ID: SA11AI.81311
	City State Zip Code Wake Forest NC 27587	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 675.00	

B.	Full Name (Last, First, Middle Initial) M David Patrick	Date of Receipt MM / DD / YYYY 07 / 02 / 2009
	Mailing Address 2811 Montcastle Court	Transaction ID: SA11AI.79134
	City State Zip Code Durham NC 27705	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 560.00	

C.	Full Name (Last, First, Middle Initial) M David Patrick	Date of Receipt MM / DD / YYYY 07 / 17 / 2009
	Mailing Address 2811 Montcastle Court	Transaction ID: SA11AI.79304
	City State Zip Code Durham NC 27705	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 600.00	

SUBTOTAL of Receipts This Page (optional)	105.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 267 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
M David Patrick

Mailing Address 2811 Montcastle Court

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
640.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	1	/	2	0	0	9

Transaction ID: SA11AI.79474

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
M David Patrick

Mailing Address 2811 Montcastle Court

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
680.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	4	/	2	0	0	9

Transaction ID: SA11AI.79642

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
M David Patrick

Mailing Address 2811 Montcastle Court

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
720.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	8	/	2	0	0	9

Transaction ID: SA11AI.79809

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **120.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 268 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
M David Patrick

Mailing Address 2811 Montcastle Court

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
760.00

Date of Receipt
MM / DD / YYYY
09 / 11 / 2009

Transaction ID: SA11AI.79977

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
M David Patrick

Mailing Address 2811 Montcastle Court

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
MM / DD / YYYY
09 / 25 / 2009

Transaction ID: SA11AI.80145

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
M David Patrick

Mailing Address 2811 Montcastle Court

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
840.00

Date of Receipt
MM / DD / YYYY
10 / 09 / 2009

Transaction ID: SA11AI.80311

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **120.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 269 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
M David Patrick

Mailing Address 2811 Montcastle Court

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
880.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.80478

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
M David Patrick

Mailing Address 2811 Montcastle Court

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
920.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.80645

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
M David Patrick

Mailing Address 2811 Montcastle Court

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.80812

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **120.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 270 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
M David Patrick

Mailing Address 2811 Montcastle Court

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	4	/	2	0	0	9

Transaction ID: SA11AI.80979

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
M David Patrick

Mailing Address 2811 Montcastle Court

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1040.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	8	/	2	0	0	9

Transaction ID: SA11AI.81644

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
M David Patrick

Mailing Address 2811 Montcastle Court

City State Zip Code
Durham NC 27705

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1080.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	9

Transaction ID: SA11AI.81312

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **120.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 271 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) M Silas Payne		Date of Receipt MM / DD / YYYY 10 / 09 / 2009
Mailing Address 2306 Buckquarter Farms Rd		Transaction ID: SA11AI.80312
City Hillsborough	State NC	Zip Code 27278
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

B.

Full Name (Last, First, Middle Initial) M Silas Payne		Date of Receipt MM / DD / YYYY 10 / 23 / 2009
Mailing Address 2306 Buckquarter Farms Rd		Transaction ID: SA11AI.80479
City Hillsborough	State NC	Zip Code 27278
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.

Full Name (Last, First, Middle Initial) M Silas Payne		Date of Receipt MM / DD / YYYY 11 / 06 / 2009
Mailing Address 2306 Buckquarter Farms Rd		Transaction ID: SA11AI.80646
City Hillsborough	State NC	Zip Code 27278
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	▶	30.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 272 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) M Silas Payne		Date of Receipt		
	Mailing Address 2306 Buckquarter Farms Rd		M M / D D / Y Y Y Y Y 1 1 / 2 0 / 2 0 0 9		
	City Hillsborough	State NC	Zip Code 27278	Transaction ID: SA11AI.80813	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00		
	Name of Employer BCBSNC	Occupation VP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Aggregate Year-to-Date ▼		240.00	

B.	Full Name (Last, First, Middle Initial) M Silas Payne		Date of Receipt		
	Mailing Address 2306 Buckquarter Farms Rd		M M / D D / Y Y Y Y Y 1 2 / 0 4 / 2 0 0 9		
	City Hillsborough	State NC	Zip Code 27278	Transaction ID: SA11AI.80980	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00		
	Name of Employer BCBSNC	Occupation VP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Aggregate Year-to-Date ▼		250.00	

C.	Full Name (Last, First, Middle Initial) M Silas Payne		Date of Receipt		
	Mailing Address 2306 Buckquarter Farms Rd		M M / D D / Y Y Y Y Y 1 2 / 1 8 / 2 0 0 9		
	City Hillsborough	State NC	Zip Code 27278	Transaction ID: SA11AI.81645	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00		
	Name of Employer BCBSNC	Occupation VP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Aggregate Year-to-Date ▼		260.00	

SUBTOTAL of Receipts This Page (optional)	▶	30.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 273 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
M Silas Payne

Mailing Address 2306 Buckquarter Farms Rd

City Hillsborough State NC Zip Code 27278

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: MM / DD / YYYY
12 / 31 / 2009

Transaction ID: SA11AI.81313

Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Gerald Petkau

Mailing Address 402 Troycott Place

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2036.37

Date of Receipt: MM / DD / YYYY
07 / 02 / 2009

Transaction ID: SA11AI.79137

Amount of Each Receipt this Period: 163.46

C. Full Name (Last, First, Middle Initial)
Gerald Petkau

Mailing Address 402 Troycott Place

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2199.83

Date of Receipt: MM / DD / YYYY
07 / 17 / 2009

Transaction ID: SA11AI.79307

Amount of Each Receipt this Period: 163.46

SUBTOTAL of Receipts This Page (optional) ► 336.92

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 274 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Gerald Petkau

Mailing Address 402 Troycott Place

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2363.29

Date of Receipt: 07 / 31 / 2009
Transaction ID: SA11AI.79477
 Amount of Each Receipt this Period: 163.46

B.

Full Name (Last, First, Middle Initial)
Gerald Petkau

Mailing Address 402 Troycott Place

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2526.75

Date of Receipt: 08 / 14 / 2009
Transaction ID: SA11AI.79645
 Amount of Each Receipt this Period: 163.46

C.

Full Name (Last, First, Middle Initial)
Gerald Petkau

Mailing Address 402 Troycott Place

City Cary State NC Zip Code 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2690.21

Date of Receipt: 08 / 28 / 2009
Transaction ID: SA11AI.79812
 Amount of Each Receipt this Period: 163.46

SUBTOTAL of Receipts This Page (optional) ► **490.38**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 275 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Gerald Petkau</p> <p>Mailing Address 402 Troycott Place</p> <p>City Cary State NC Zip Code 27519</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC Occupation VP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2853.67</p>	<p>Date of Receipt MM / DD / YYYY 09 / 11 / 2009</p> <p>Transaction ID: SA11AI.79980</p> <p>Amount of Each Receipt this Period 163.46</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) Gerald Petkau</p> <p>Mailing Address 402 Troycott Place</p> <p>City Cary State NC Zip Code 27519</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC Occupation VP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 3017.13</p>	<p>Date of Receipt MM / DD / YYYY 09 / 25 / 2009</p> <p>Transaction ID: SA11AI.80148</p> <p>Amount of Each Receipt this Period 163.46</p>
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<p>C. Full Name (Last, First, Middle Initial) Gerald Petkau</p> <p>Mailing Address 402 Troycott Place</p> <p>City Cary State NC Zip Code 27519</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC Occupation VP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 3180.59</p>	<p>Date of Receipt MM / DD / YYYY 10 / 09 / 2009</p> <p>Transaction ID: SA11AI.80314</p> <p>Amount of Each Receipt this Period 163.46</p>
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SUBTOTAL of Receipts This Page (optional)	490.38
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 276 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Gerald Petkau
 Mailing Address 402 Troycott Place
 City Cary State NC Zip Code 27519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3344.05
 Date of Receipt 10 / 23 / 2009
Transaction ID: SA11AI.80481
 Amount of Each Receipt this Period 163.46

B. Full Name (Last, First, Middle Initial)
Gerald Petkau
 Mailing Address 402 Troycott Place
 City Cary State NC Zip Code 27519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3507.51
 Date of Receipt 11 / 06 / 2009
Transaction ID: SA11AI.80648
 Amount of Each Receipt this Period 163.46

C. Full Name (Last, First, Middle Initial)
Gerald Petkau
 Mailing Address 402 Troycott Place
 City Cary State NC Zip Code 27519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3670.97
 Date of Receipt 11 / 20 / 2009
Transaction ID: SA11AI.80815
 Amount of Each Receipt this Period 163.46

SUBTOTAL of Receipts This Page (optional) ► 490.38
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 277 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Gerald Petkau

Mailing Address 402 Troycott Place

City State Zip Code
Cary NC 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3834.43

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.80982

Amount of Each Receipt this Period

163.46

B.

Full Name (Last, First, Middle Initial)
Gerald Petkau

Mailing Address 402 Troycott Place

City State Zip Code
Cary NC 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3997.89

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81647

Amount of Each Receipt this Period

163.46

C.

Full Name (Last, First, Middle Initial)
Gerald Petkau

Mailing Address 402 Troycott Place

City State Zip Code
Cary NC 27519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4161.35

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81315

Amount of Each Receipt this Period

163.46

SUBTOTAL of Receipts This Page (optional) ▶

490.38

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 278 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jocelyn Pickett		Date of Receipt MM / DD / YYYY 07 / 02 / 2009		
	Mailing Address 203 Chancellor's Ridge		Transaction ID: SA11AI.79140		
	City Durham	State NC	Zip Code 27713	Amount of Each Receipt this Period 30.81	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director	Aggregate Year-to-Date 426.14		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Jocelyn Pickett		Date of Receipt MM / DD / YYYY 07 / 17 / 2009		
	Mailing Address 203 Chancellor's Ridge		Transaction ID: SA11AI.79310		
	City Durham	State NC	Zip Code 27713	Amount of Each Receipt this Period 30.81	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director	Aggregate Year-to-Date 456.95		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Jocelyn Pickett		Date of Receipt MM / DD / YYYY 07 / 31 / 2009		
	Mailing Address 203 Chancellor's Ridge		Transaction ID: SA11AI.79480		
	City Durham	State NC	Zip Code 27713	Amount of Each Receipt this Period 30.81	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director	Aggregate Year-to-Date 487.76		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional) ▶

92.43

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 279 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 518.57

Date of Receipt
MM / DD / YYYY
08 / 14 / 2009

Transaction ID: SA11AI.79648

Amount of Each Receipt this Period
30.81

B. Full Name (Last, First, Middle Initial)
Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 549.38

Date of Receipt
MM / DD / YYYY
08 / 28 / 2009

Transaction ID: SA11AI.79815

Amount of Each Receipt this Period
30.81

C. Full Name (Last, First, Middle Initial)
Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 580.19

Date of Receipt
MM / DD / YYYY
09 / 11 / 2009

Transaction ID: SA11AI.79983

Amount of Each Receipt this Period
30.81

SUBTOTAL of Receipts This Page (optional) ► **92.43**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 280 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Jocelyn Pickett		Date of Receipt MM / DD / YYYY 09 / 25 / 2009
Mailing Address 203 Chancellor's Ridge		Transaction ID: SA11AI.80151
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.81
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 611.00	

B.

Full Name (Last, First, Middle Initial) Jocelyn Pickett		Date of Receipt MM / DD / YYYY 10 / 09 / 2009
Mailing Address 203 Chancellor's Ridge		Transaction ID: SA11AI.80317
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.81
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 641.81	

C.

Full Name (Last, First, Middle Initial) Jocelyn Pickett		Date of Receipt MM / DD / YYYY 10 / 23 / 2009
Mailing Address 203 Chancellor's Ridge		Transaction ID: SA11AI.80484
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.81
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 672.62	

SUBTOTAL of Receipts This Page (optional)	92.43
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 281 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
703.43

Date of Receipt
MM / DD / YYYY
11 / 06 / 2009

Transaction ID: SA11AI.80651

Amount of Each Receipt this Period
30.81

B.

Full Name (Last, First, Middle Initial)
Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
734.24

Date of Receipt
MM / DD / YYYY
11 / 20 / 2009

Transaction ID: SA11AI.80818

Amount of Each Receipt this Period
30.81

C.

Full Name (Last, First, Middle Initial)
Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
765.05

Date of Receipt
MM / DD / YYYY
12 / 04 / 2009

Transaction ID: SA11AI.80985

Amount of Each Receipt this Period
30.81

SUBTOTAL of Receipts This Page (optional) ► **92.43**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 282 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
795.86

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81650

Amount of Each Receipt this Period
30.81

B. Full Name (Last, First, Middle Initial)
Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
826.67

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81318

Amount of Each Receipt this Period
30.81

C. Full Name (Last, First, Middle Initial)
A Tracy Pickett

Mailing Address 4123 Brenmar's Lane

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Sr. System Test Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
212.58

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 0 2 / 2 0 0 9

Transaction ID: SA11AI.79141

Amount of Each Receipt this Period
15.37

SUBTOTAL of Receipts This Page (optional)	▶	76.99
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 283 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) A Tracy Pickett	Date of Receipt MM / DD / YYYY 07 / 17 / 2009
	Mailing Address 4123 Brenmar's Lane	Transaction ID: SA11AI.79311
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 15.37
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Sr. System Test Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 227.95	

B.	Full Name (Last, First, Middle Initial) A Tracy Pickett	Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 4123 Brenmar's Lane	Transaction ID: SA11AI.79481
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 15.37
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Sr. System Test Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 243.32	

C.	Full Name (Last, First, Middle Initial) A Tracy Pickett	Date of Receipt MM / DD / YYYY 08 / 14 / 2009
	Mailing Address 4123 Brenmar's Lane	Transaction ID: SA11AI.79649
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 15.37
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Sr. System Test Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 258.69	

SUBTOTAL of Receipts This Page (optional)	▶	46.11
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 284 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) A Tracy Pickett		Date of Receipt
	Mailing Address 4123 Brenmar's Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 28 / 2009
	City	State	Zip Code
	Durham	NC	27713
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.79816
Name of Employer BCBSNC		Occupation Sr. System Test Specialist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 274.06	<input type="text"/> 15.37

B.	Full Name (Last, First, Middle Initial) A Tracy Pickett		Date of Receipt
	Mailing Address 4123 Brenmar's Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 11 / 2009
	City	State	Zip Code
	Durham	NC	27713
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.79984
Name of Employer BCBSNC		Occupation Sr. System Test Specialist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 289.43	<input type="text"/> 15.37

C.	Full Name (Last, First, Middle Initial) A Tracy Pickett		Date of Receipt
	Mailing Address 4123 Brenmar's Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 25 / 2009
	City	State	Zip Code
	Durham	NC	27713
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80152
Name of Employer BCBSNC		Occupation Sr. System Test Specialist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 304.80	<input type="text"/> 15.37

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 46.11
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 285 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) A Tracy Pickett		Date of Receipt MM / DD / YYYY 10 / 09 / 2009		
	Mailing Address 4123 Brenmar's Lane		Transaction ID: SA11AI.80318		
	City Durham	State NC	Zip Code 27713	Amount of Each Receipt this Period 15.37	
	FEC ID number of contributing federal political committee. C		Name of Employer BCBSNC		
Occupation Sr. System Test Specialist		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 320.17					

B.	Full Name (Last, First, Middle Initial) A Tracy Pickett		Date of Receipt MM / DD / YYYY 10 / 23 / 2009		
	Mailing Address 4123 Brenmar's Lane		Transaction ID: SA11AI.80485		
	City Durham	State NC	Zip Code 27713	Amount of Each Receipt this Period 15.37	
	FEC ID number of contributing federal political committee. C		Name of Employer BCBSNC		
Occupation Sr. System Test Specialist		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 335.54					

C.	Full Name (Last, First, Middle Initial) A Tracy Pickett		Date of Receipt MM / DD / YYYY 11 / 06 / 2009		
	Mailing Address 4123 Brenmar's Lane		Transaction ID: SA11AI.80652		
	City Durham	State NC	Zip Code 27713	Amount of Each Receipt this Period 15.37	
	FEC ID number of contributing federal political committee. C		Name of Employer BCBSNC		
Occupation Sr. System Test Specialist		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 350.91					

SUBTOTAL of Receipts This Page (optional) ▶

46.11

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 286 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Date of Receipt																				
Full Name (Last, First, Middle Initial) A Tracy Pickett	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	0		2	0	0	9												
Mailing Address 4123 Brenmar's Lane	Transaction ID: SA11AI.80819																				
City State Zip Code Durham NC 27713	Amount of Each Receipt this Period <table border="1"><tr><td>15.37</td></tr></table>	15.37																			
15.37																					
FEC ID number of contributing federal political committee. C																					
Name of Employer BCBSNC Occupation Sr. System Test Specialist																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"><tr><td>366.28</td></tr></table>	366.28																			
366.28																					

B.	Date of Receipt																				
Full Name (Last, First, Middle Initial) A Tracy Pickett	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	4		2	0	0	9												
Mailing Address 4123 Brenmar's Lane	Transaction ID: SA11AI.80986																				
City State Zip Code Durham NC 27713	Amount of Each Receipt this Period <table border="1"><tr><td>15.37</td></tr></table>	15.37																			
15.37																					
FEC ID number of contributing federal political committee. C																					
Name of Employer BCBSNC Occupation Sr. System Test Specialist																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"><tr><td>381.65</td></tr></table>	381.65																			
381.65																					

C.	Date of Receipt																				
Full Name (Last, First, Middle Initial) A Tracy Pickett	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	8		2	0	0	9												
Mailing Address 4123 Brenmar's Lane	Transaction ID: SA11AI.81651																				
City State Zip Code Durham NC 27713	Amount of Each Receipt this Period <table border="1"><tr><td>13.83</td></tr></table>	13.83																			
13.83																					
FEC ID number of contributing federal political committee. C																					
Name of Employer BCBSNC Occupation Sr. System Test Specialist																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"><tr><td>395.48</td></tr></table>	395.48																			
395.48																					

SUBTOTAL of Receipts This Page (optional)	<table border="1"><tr><td>44.57</td></tr></table>	44.57
44.57		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 287 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

A Tracy Pickett

Mailing Address 4123 Brenmar's Lane

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Sr. System Test Specialist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 410.85

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81319

Amount of Each Receipt this Period

15.37

B.

Full Name (Last, First, Middle Initial)

K Nathan Prather

Mailing Address 319 Montibello Drive

City State Zip Code
Cary NC 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 420.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 2 / 2 0 0 9

Transaction ID: SA11AI.79144

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

K Nathan Prather

Mailing Address 319 Montibello Drive

City State Zip Code
Cary NC 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.79314

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

75.37

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 288 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) K Nathan Prather		Date of Receipt MM / DD / YYYY 07 / 31 / 2009		
	Mailing Address 319 Montibello Drive		Transaction ID: SA11AI.79484		
	City Cary	State NC	Zip Code 27513	Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 480.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) K Nathan Prather		Date of Receipt MM / DD / YYYY 08 / 14 / 2009		
	Mailing Address 319 Montibello Drive		Transaction ID: SA11AI.79652		
	City Cary	State NC	Zip Code 27513	Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 510.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) K Nathan Prather		Date of Receipt MM / DD / YYYY 08 / 28 / 2009		
	Mailing Address 319 Montibello Drive		Transaction ID: SA11AI.79819		
	City Cary	State NC	Zip Code 27513	Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 540.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional) ▶

90.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 289 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
K Nathan Prather

Mailing Address 319 Montibello Drive

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 570.00

Date of Receipt: 09 / 11 / 2009
Transaction ID: SA11AI.79987
 Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial)
K Nathan Prather

Mailing Address 319 Montibello Drive

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 09 / 25 / 2009
Transaction ID: SA11AI.80155
 Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
K Nathan Prather

Mailing Address 319 Montibello Drive

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 630.00

Date of Receipt: 10 / 09 / 2009
Transaction ID: SA11AI.80321
 Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 290 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
K Nathan Prather

Mailing Address 319 Montibello Drive

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt: 10 / 23 / 2009
Transaction ID: SA11AI.80488
Amount of Each Receipt this Period: 30.00

B.

Full Name (Last, First, Middle Initial)
K Nathan Prather

Mailing Address 319 Montibello Drive

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

Date of Receipt: 11 / 06 / 2009
Transaction ID: SA11AI.80655
Amount of Each Receipt this Period: 30.00

C.

Full Name (Last, First, Middle Initial)
K Nathan Prather

Mailing Address 319 Montibello Drive

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt: 11 / 20 / 2009
Transaction ID: SA11AI.80822
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 291 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
K Nathan Prather

Mailing Address 319 Montibello Drive

City State Zip Code
Cary NC 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.80989

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)
K Nathan Prather

Mailing Address 319 Montibello Drive

City State Zip Code
Cary NC 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 780.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81654

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)
K Nathan Prather

Mailing Address 319 Montibello Drive

City State Zip Code
Cary NC 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 810.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81322

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional) ▶

90.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 292 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) B Christy Radcliff		Date of Receipt MM / DD / YYYY 10 / 09 / 2009
Mailing Address		Transaction ID: SA11AI.80323
City State Zip Code		Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C	Occupation Account Manager	
Name of Employer BCBSNC	Aggregate Year-to-Date 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) B Christy Radcliff		Date of Receipt MM / DD / YYYY 10 / 23 / 2009
Mailing Address		Transaction ID: SA11AI.80490
City State Zip Code		Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C	Occupation Account Manager	
Name of Employer BCBSNC	Aggregate Year-to-Date 220.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) B Christy Radcliff		Date of Receipt MM / DD / YYYY 11 / 06 / 2009
Mailing Address		Transaction ID: SA11AI.80657
City State Zip Code		Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C	Occupation Account Manager	
Name of Employer BCBSNC	Aggregate Year-to-Date 230.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	30.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 293 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
B Christy Radcliff

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Account Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.80824

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
B Christy Radcliff

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Account Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.80991

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
B Christy Radcliff

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Account Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81656

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **30.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 294 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
B Christy Radcliff

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Account Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81324

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Paul Reeves

Mailing Address 236 Coachlight Trail

City State Zip Code
Burlington NC 27215

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Project Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 421.85

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 0 2 / 2 0 0 9

Transaction ID: SA11AI.79149

Amount of Each Receipt this Period
30.45

C.

Full Name (Last, First, Middle Initial)
Paul Reeves

Mailing Address 236 Coachlight Trail

City State Zip Code
Burlington NC 27215

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Project Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 452.30

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.79319

Amount of Each Receipt this Period
30.45

SUBTOTAL of Receipts This Page (optional) ► **70.90**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 295 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
Mailing Address 236 Coachlight Trail		Transaction ID: SA11AI.79489
City Burlington	State NC	Zip Code 27215
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.45
Name of Employer BCBSNC	Occupation Project Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 482.75	

B.

Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt MM / DD / YYYY 08 / 14 / 2009
Mailing Address 236 Coachlight Trail		Transaction ID: SA11AI.79657
City Burlington	State NC	Zip Code 27215
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.45
Name of Employer BCBSNC	Occupation Project Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 513.20	

C.

Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt MM / DD / YYYY 08 / 28 / 2009
Mailing Address 236 Coachlight Trail		Transaction ID: SA11AI.79824
City Burlington	State NC	Zip Code 27215
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.45
Name of Employer BCBSNC	Occupation Project Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 543.65	

SUBTOTAL of Receipts This Page (optional)	▶	91.35
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 296 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt MM / DD / YYYY 09 / 11 / 2009		
	Mailing Address 236 Coachlight Trail		Transaction ID: SA11AI.79992		
	City Burlington	State NC	Zip Code 27215	Amount of Each Receipt this Period 30.45	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Project Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 574.10			

B.	Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt MM / DD / YYYY 09 / 25 / 2009		
	Mailing Address 236 Coachlight Trail		Transaction ID: SA11AI.80160		
	City Burlington	State NC	Zip Code 27215	Amount of Each Receipt this Period 30.45	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Project Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 604.55			

C.	Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt MM / DD / YYYY 10 / 09 / 2009		
	Mailing Address 236 Coachlight Trail		Transaction ID: SA11AI.80326		
	City Burlington	State NC	Zip Code 27215	Amount of Each Receipt this Period 30.45	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Project Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 635.00			

SUBTOTAL of Receipts This Page (optional)	▶	91.35
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 297 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Paul Reeves	Date of Receipt MM / DD / YYYY 10 / 23 / 2009
	Mailing Address 236 Coachlight Trail	Transaction ID: SA11AI.80493
	City State Zip Code Burlington NC 27215	Amount of Each Receipt this Period 30.45
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Project Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 665.45	

B.	Full Name (Last, First, Middle Initial) Paul Reeves	Date of Receipt MM / DD / YYYY 11 / 06 / 2009
	Mailing Address 236 Coachlight Trail	Transaction ID: SA11AI.80660
	City State Zip Code Burlington NC 27215	Amount of Each Receipt this Period 30.45
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Project Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 695.90	

C.	Full Name (Last, First, Middle Initial) Paul Reeves	Date of Receipt MM / DD / YYYY 11 / 20 / 2009
	Mailing Address 236 Coachlight Trail	Transaction ID: SA11AI.80827
	City State Zip Code Burlington NC 27215	Amount of Each Receipt this Period 30.45
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Project Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 726.35	

SUBTOTAL of Receipts This Page (optional)	91.35
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 298 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt MM / DD / YYYY 12 / 04 / 2009		
	Mailing Address 236 Coachlight Trail		Transaction ID: SA11AI.80994		
	City Burlington	State NC	Zip Code 27215	Amount of Each Receipt this Period 30.45	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Project Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 756.80			

B.	Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt MM / DD / YYYY 12 / 18 / 2009		
	Mailing Address 236 Coachlight Trail		Transaction ID: SA11AI.81659		
	City Burlington	State NC	Zip Code 27215	Amount of Each Receipt this Period 30.45	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Project Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 787.25			

C.	Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 236 Coachlight Trail		Transaction ID: SA11AI.81327		
	City Burlington	State NC	Zip Code 27215	Amount of Each Receipt this Period 30.45	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Project Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 817.70			

SUBTOTAL of Receipts This Page (optional)	▶	91.35
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 299 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City State Zip Code
Durham NC 27712

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1134.56

Date of Receipt
MM / DD / YYYY
07 / 02 / 2009

Transaction ID: SA11AI.79150

Amount of Each Receipt this Period
81.04

B. Full Name (Last, First, Middle Initial)
Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City State Zip Code
Durham NC 27712

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1215.60

Date of Receipt
MM / DD / YYYY
07 / 17 / 2009

Transaction ID: SA11AI.79320

Amount of Each Receipt this Period
81.04

C. Full Name (Last, First, Middle Initial)
Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City State Zip Code
Durham NC 27712

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1296.64

Date of Receipt
MM / DD / YYYY
07 / 31 / 2009

Transaction ID: SA11AI.79490

Amount of Each Receipt this Period
81.04

SUBTOTAL of Receipts This Page (optional) ► **243.12**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 300 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Harry Reynolds, Jr.
Mailing Address 1201 Summerville Lane

City	State	Zip Code
Durham	NC	27712

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC	Occupation VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1377.68

Date of Receipt
MM / DD / YYYY
08 / 14 / 2009
Transaction ID: SA11AI.79658
Amount of Each Receipt this Period
81.04

B. Full Name (Last, First, Middle Initial)
Mr. Harry Reynolds, Jr.
Mailing Address 1201 Summerville Lane

City	State	Zip Code
Durham	NC	27712

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC	Occupation VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1458.72

Date of Receipt
MM / DD / YYYY
08 / 28 / 2009
Transaction ID: SA11AI.79825
Amount of Each Receipt this Period
81.04

C. Full Name (Last, First, Middle Initial)
Mr. Harry Reynolds, Jr.
Mailing Address 1201 Summerville Lane

City	State	Zip Code
Durham	NC	27712

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC	Occupation VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1491.14

Date of Receipt
MM / DD / YYYY
09 / 11 / 2009
Transaction ID: SA11AI.79993
Amount of Each Receipt this Period
32.42

SUBTOTAL of Receipts This Page (optional)	▶	194.50
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 301 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City	State	Zip Code
Durham	NC	27712

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1572.18

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 25 / 2009

Transaction ID: SA11AI.80161

Amount of Each Receipt this Period
81.04

B. Full Name (Last, First, Middle Initial)
Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City	State	Zip Code
Durham	NC	27712

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1653.22

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 09 / 2009

Transaction ID: SA11AI.80327

Amount of Each Receipt this Period
81.04

C. Full Name (Last, First, Middle Initial)
Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City	State	Zip Code
Durham	NC	27712

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1734.26

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 23 / 2009

Transaction ID: SA11AI.80494

Amount of Each Receipt this Period
81.04

SUBTOTAL of Receipts This Page (optional)	▶	243.12
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 302 / 394		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Harry Reynolds, Jr.		Date of Receipt MM / DD / YYYY 11 / 06 / 2009		
	Mailing Address 1201 Summerville Lane		Transaction ID: SA11AI.80661		
	City Durham	State NC	Zip Code 27712	Amount of Each Receipt this Period 81.04	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1815.30		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Mr. Harry Reynolds, Jr.		Date of Receipt MM / DD / YYYY 11 / 20 / 2009		
	Mailing Address 1201 Summerville Lane		Transaction ID: SA11AI.80828		
	City Durham	State NC	Zip Code 27712	Amount of Each Receipt this Period 81.04	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1896.34		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Mr. Harry Reynolds, Jr.		Date of Receipt MM / DD / YYYY 12 / 04 / 2009		
	Mailing Address 1201 Summerville Lane		Transaction ID: SA11AI.80995		
	City Durham	State NC	Zip Code 27712	Amount of Each Receipt this Period 81.04	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1977.38		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	▶	243.12
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 303 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City State Zip Code
Durham NC 27712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
2058.42

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81660

Amount of Each Receipt this Period

81.04

B.

Full Name (Last, First, Middle Initial)
Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City State Zip Code
Durham NC 27712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
2139.46

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81328

Amount of Each Receipt this Period

81.04

C.

Full Name (Last, First, Middle Initial)
Melissa Robinson

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
376.22

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 2 / 2 0 0 9

Transaction ID: SA11AI.79152

Amount of Each Receipt this Period

27.13

SUBTOTAL of Receipts This Page (optional)

189.21

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 304 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Melissa Robinson		Date of Receipt MM / DD / YYYY 07 / 17 / 2009
Mailing Address		Transaction ID: SA11AI.79322
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 27.13
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 403.35	

B.

Full Name (Last, First, Middle Initial) Melissa Robinson		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
Mailing Address		Transaction ID: SA11AI.79492
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 27.13
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 430.48	

C.

Full Name (Last, First, Middle Initial) Melissa Robinson		Date of Receipt MM / DD / YYYY 08 / 14 / 2009
Mailing Address		Transaction ID: SA11AI.79660
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 27.13
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 457.61	

SUBTOTAL of Receipts This Page (optional)	▶	81.39
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 305 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Melissa Robinson	Date of Receipt MM / DD / YYYY 08 / 28 / 2009
	Mailing Address	Transaction ID: SA11AI.79827
	City State Zip Code	Amount of Each Receipt this Period 27.13
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 484.74	

B.	Full Name (Last, First, Middle Initial) Melissa Robinson	Date of Receipt MM / DD / YYYY 09 / 11 / 2009
	Mailing Address	Transaction ID: SA11AI.79995
	City State Zip Code	Amount of Each Receipt this Period 27.13
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 511.87	

C.	Full Name (Last, First, Middle Initial) Melissa Robinson	Date of Receipt MM / DD / YYYY 09 / 25 / 2009
	Mailing Address	Transaction ID: SA11AI.80163
	City State Zip Code	Amount of Each Receipt this Period 27.13
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 539.00	

SUBTOTAL of Receipts This Page (optional)	81.39
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 306 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Melissa Robinson

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 566.13

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	9	/	2	0	0	9

Transaction ID: SA11AI.80329

Amount of Each Receipt this Period
27.13

B.

Full Name (Last, First, Middle Initial)
Melissa Robinson

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 593.26

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	9

Transaction ID: SA11AI.80496

Amount of Each Receipt this Period
27.13

C.

Full Name (Last, First, Middle Initial)
Melissa Robinson

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 620.39

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	0	9

Transaction ID: SA11AI.80663

Amount of Each Receipt this Period
27.13

SUBTOTAL of Receipts This Page (optional) ► **81.39**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 307 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Melissa Robinson

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 647.52

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.80830

Amount of Each Receipt this Period
27.13

B. Full Name (Last, First, Middle Initial)
Melissa Robinson

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 674.65

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.80997

Amount of Each Receipt this Period
27.13

C. Full Name (Last, First, Middle Initial)
Melissa Robinson

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.93

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81662

Amount of Each Receipt this Period
16.28

SUBTOTAL of Receipts This Page (optional) ► **70.54**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 308 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. John Roos		Date of Receipt	
	Mailing Address 119 Draymore Way		M M / D D / Y Y Y Y Y 07 / 02 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79153
	Morrisville	NC	27560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2692.20		

B.	Full Name (Last, First, Middle Initial) Mr. John Roos		Date of Receipt	
	Mailing Address 119 Draymore Way		M M / D D / Y Y Y Y Y 07 / 17 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79323
	Morrisville	NC	27560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2884.50		

C.	Full Name (Last, First, Middle Initial) Mr. John Roos		Date of Receipt	
	Mailing Address 119 Draymore Way		M M / D D / Y Y Y Y Y 07 / 31 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79493
	Morrisville	NC	27560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		3076.80		

SUBTOTAL of Receipts This Page (optional)	▶	576.90
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 309 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Mr. John Roos		Date of Receipt MM / DD / YYYY 08 / 14 / 2009
Mailing Address 119 Draymore Way		Transaction ID: SA11AI.79661
City Morrisville	State NC	Zip Code 27560
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3269.10	

B.

Full Name (Last, First, Middle Initial) Mr. John Roos		Date of Receipt MM / DD / YYYY 08 / 28 / 2009
Mailing Address 119 Draymore Way		Transaction ID: SA11AI.79828
City Morrisville	State NC	Zip Code 27560
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3461.40	

C.

Full Name (Last, First, Middle Initial) Mr. John Roos		Date of Receipt MM / DD / YYYY 09 / 11 / 2009
Mailing Address 119 Draymore Way		Transaction ID: SA11AI.79996
City Morrisville	State NC	Zip Code 27560
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3653.70	

SUBTOTAL of Receipts This Page (optional)	576.90
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 310 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mr. John Roos

Mailing Address 119 Draymore Way

City State Zip Code
Morrisville NC 27560

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3846.00

Date of Receipt
MM / DD / YYYY
09 / 25 / 2009

Transaction ID: SA11AI.80164

Amount of Each Receipt this Period
192.30

B.

Full Name (Last, First, Middle Initial)
Mr. John Roos

Mailing Address 119 Draymore Way

City State Zip Code
Morrisville NC 27560

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4038.30

Date of Receipt
MM / DD / YYYY
10 / 09 / 2009

Transaction ID: SA11AI.80330

Amount of Each Receipt this Period
192.30

C.

Full Name (Last, First, Middle Initial)
Mr. John Roos

Mailing Address 119 Draymore Way

City State Zip Code
Morrisville NC 27560

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4230.60

Date of Receipt
MM / DD / YYYY
10 / 23 / 2009

Transaction ID: SA11AI.80497

Amount of Each Receipt this Period
192.30

SUBTOTAL of Receipts This Page (optional) ► **576.90**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 311 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. John Roos

Mailing Address 119 Draymore Way

City State Zip Code
Morrisville NC 27560

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4422.90

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	0	9

Transaction ID: SA11AI.80664

Amount of Each Receipt this Period
192.30

B. Full Name (Last, First, Middle Initial)
Mr. John Roos

Mailing Address 119 Draymore Way

City State Zip Code
Morrisville NC 27560

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4615.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	0	/	2	0	0	9

Transaction ID: SA11AI.80831

Amount of Each Receipt this Period
192.30

C. Full Name (Last, First, Middle Initial)
Mr. John Roos

Mailing Address 119 Draymore Way

City State Zip Code
Morrisville NC 27560

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4807.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	4	/	2	0	0	9

Transaction ID: SA11AI.80998

Amount of Each Receipt this Period
192.30

SUBTOTAL of Receipts This Page (optional) ► **576.90**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 312 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Mr. John Roos		Date of Receipt MM / DD / YYYY 12 / 18 / 2009
Mailing Address 119 Draymore Way		Transaction ID: SA11AI.81663
City Morrisville	State NC	Zip Code 27560
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4999.80	

B.

Full Name (Last, First, Middle Initial) Mr. John Roos		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 119 Draymore Way		Transaction ID: SA11AI.81330
City Morrisville	State NC	Zip Code 27560
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5192.10	

C.

Full Name (Last, First, Middle Initial) V Tarsha Rowland		Date of Receipt MM / DD / YYYY 07 / 02 / 2009
Mailing Address 5021 Robinwood Rd		Transaction ID: SA11AI.79154
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.91
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.59	

SUBTOTAL of Receipts This Page (optional)	418.51
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 313 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) V Tarsha Rowland	Date of Receipt MM / DD / YYYY 07 / 17 / 2009
	Mailing Address 5021 Robinwood Rd	Transaction ID: SA11AI.79324
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 33.91
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 502.50	

B.	Full Name (Last, First, Middle Initial) V Tarsha Rowland	Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 5021 Robinwood Rd	Transaction ID: SA11AI.79494
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 33.91
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 536.41	

C.	Full Name (Last, First, Middle Initial) V Tarsha Rowland	Date of Receipt MM / DD / YYYY 08 / 14 / 2009
	Mailing Address 5021 Robinwood Rd	Transaction ID: SA11AI.79662
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 33.91
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 570.32	

SUBTOTAL of Receipts This Page (optional)	101.73
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 314 / 394 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) V Tarsha Rowland</p> <p>Mailing Address 5021 Robinwood Rd</p> <hr/> <p>City State Zip Code Durham NC 27713</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC Occupation Director</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 604.23</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>8</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p>Transaction ID: SA11AI.79829</p> <p>Amount of Each Receipt this Period 33.91</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	8		2	0	0	9												

<p>B. Full Name (Last, First, Middle Initial) V Tarsha Rowland</p> <p>Mailing Address 5021 Robinwood Rd</p> <hr/> <p>City State Zip Code Durham NC 27713</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC Occupation Director</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 638.14</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>9</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p>Transaction ID: SA11AI.79997</p> <p>Amount of Each Receipt this Period 33.91</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	1		2	0	0	9												

<p>C. Full Name (Last, First, Middle Initial) V Tarsha Rowland</p> <p>Mailing Address 5021 Robinwood Rd</p> <hr/> <p>City State Zip Code Durham NC 27713</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC Occupation Director</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 672.05</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>9</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p>Transaction ID: SA11AI.80165</p> <p>Amount of Each Receipt this Period 33.91</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	5		2	0	0	9												

<p>SUBTOTAL of Receipts This Page (optional)</p>	101.73
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 315 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) V Tarsha Rowland		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 9 / 2 0 0 9
Mailing Address 5021 Robinwood Rd		Transaction ID: SA11AI.80331
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.91
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 705.96	

B.

Full Name (Last, First, Middle Initial) V Tarsha Rowland		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 9
Mailing Address 5021 Robinwood Rd		Transaction ID: SA11AI.80498
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.91
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 739.87	

C.

Full Name (Last, First, Middle Initial) V Tarsha Rowland		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 9
Mailing Address 5021 Robinwood Rd		Transaction ID: SA11AI.80665
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.91
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 773.78	

SUBTOTAL of Receipts This Page (optional)	101.73
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 316 / 394
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) V Tarsha Rowland	Date of Receipt
	Mailing Address 5021 Robinwood Rd	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 2 0 / 2 0 0 9
	City State Zip Code Durham NC 27713	Transaction ID: SA11AI.80832
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 33.91
	Name of Employer BCBSNC Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 807.69	

B.	Full Name (Last, First, Middle Initial) V Tarsha Rowland	Date of Receipt
	Mailing Address 5021 Robinwood Rd	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 0 4 / 2 0 0 9
	City State Zip Code Durham NC 27713	Transaction ID: SA11AI.80999
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 33.91
	Name of Employer BCBSNC Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 841.60	

C.	Full Name (Last, First, Middle Initial) V Tarsha Rowland	Date of Receipt
	Mailing Address 5021 Robinwood Rd	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 1 8 / 2 0 0 9
	City State Zip Code Durham NC 27713	Transaction ID: SA11AI.81664
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 33.91
	Name of Employer BCBSNC Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 875.51	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 101.73
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 317 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
V Tarsha Rowland

Mailing Address 5021 Robinwood Rd

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 909.42

Date of Receipt MM / DD / YYYY
12 / 31 / 2009

Transaction ID: SA11AI.81331

Amount of Each Receipt this Period 33.91

B. Full Name (Last, First, Middle Initial)
A Leon Sabarsky

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Program Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 470.01

Date of Receipt MM / DD / YYYY
07 / 02 / 2009

Transaction ID: SA11AI.79155

Amount of Each Receipt this Period 34.04

C. Full Name (Last, First, Middle Initial)
A Leon Sabarsky

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Program Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 504.05

Date of Receipt MM / DD / YYYY
07 / 17 / 2009

Transaction ID: SA11AI.79325

Amount of Each Receipt this Period 34.04

SUBTOTAL of Receipts This Page (optional) ► 101.99

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 318 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) A Leon Sabarsky		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
Mailing Address		Transaction ID: SA11AI.79495
City State Zip Code		Amount of Each Receipt this Period 34.04
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation Program Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 538.09	

B.

Full Name (Last, First, Middle Initial) A Leon Sabarsky		Date of Receipt MM / DD / YYYY 08 / 14 / 2009
Mailing Address		Transaction ID: SA11AI.79663
City State Zip Code		Amount of Each Receipt this Period 34.04
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation Program Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 572.13	

C.

Full Name (Last, First, Middle Initial) A Leon Sabarsky		Date of Receipt MM / DD / YYYY 08 / 28 / 2009
Mailing Address		Transaction ID: SA11AI.79830
City State Zip Code		Amount of Each Receipt this Period 34.04
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation Program Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 606.17	

SUBTOTAL of Receipts This Page (optional)	102.12
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 319 / 394		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) A Leon Sabarsky		Date of Receipt
	Mailing Address		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 11 / 2009
	City State Zip Code		Transaction ID: SA11AI.79998
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.04
	Name of Employer BCBSNC	Occupation Program Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 640.21	

B.	Full Name (Last, First, Middle Initial) A Leon Sabarsky		Date of Receipt
	Mailing Address		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 25 / 2009
	City State Zip Code		Transaction ID: SA11AI.80166
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.04
	Name of Employer BCBSNC	Occupation Program Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 674.25	

C.	Full Name (Last, First, Middle Initial) A Leon Sabarsky		Date of Receipt
	Mailing Address		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 09 / 2009
	City State Zip Code		Transaction ID: SA11AI.80332
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.04
	Name of Employer BCBSNC	Occupation Program Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 708.29	

SUBTOTAL of Receipts This Page (optional)	102.12
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 320 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
A Leon Sabarsky

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Program Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 742.33

Date of Receipt
MM / DD / YYYY
10 / 23 / 2009

Transaction ID: SA11AI.80499

Amount of Each Receipt this Period
34.04

B.

Full Name (Last, First, Middle Initial)
A Leon Sabarsky

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Program Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 776.37

Date of Receipt
MM / DD / YYYY
11 / 06 / 2009

Transaction ID: SA11AI.80666

Amount of Each Receipt this Period
34.04

C.

Full Name (Last, First, Middle Initial)
A Leon Sabarsky

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Program Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 810.41

Date of Receipt
MM / DD / YYYY
11 / 20 / 2009

Transaction ID: SA11AI.80833

Amount of Each Receipt this Period
34.04

SUBTOTAL of Receipts This Page (optional) ► 102.12

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 321 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
A Leon Sabarsky

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Program Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 844.45

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.81000

Amount of Each Receipt this Period
34.04

B. Full Name (Last, First, Middle Initial)
A Leon Sabarsky

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Program Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 878.49

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81665

Amount of Each Receipt this Period
34.04

C. Full Name (Last, First, Middle Initial)
A Leon Sabarsky

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Program Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 912.53

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81332

Amount of Each Receipt this Period
34.04

SUBTOTAL of Receipts This Page (optional) ► **102.12**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 322 / 394		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) M Gayle Sauer		Date of Receipt MM / DD / YYYY 07 / 31 / 2009	
	Mailing Address		Transaction ID: SA11AI.79498	
	City State Zip Code		Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C			
	Name of Employer BCBSNC		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00		

B.	Full Name (Last, First, Middle Initial) M Gayle Sauer		Date of Receipt MM / DD / YYYY 08 / 14 / 2009	
	Mailing Address		Transaction ID: SA11AI.79666	
	City State Zip Code		Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C			
	Name of Employer BCBSNC		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00		

C.	Full Name (Last, First, Middle Initial) M Gayle Sauer		Date of Receipt MM / DD / YYYY 08 / 28 / 2009	
	Mailing Address		Transaction ID: SA11AI.79833	
	City State Zip Code		Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C			
	Name of Employer BCBSNC		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00		

SUBTOTAL of Receipts This Page (optional)	▶	90.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 323 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) M Gayle Sauer	Date of Receipt MM / DD / YYYY 09 / 11 / 2009
	Mailing Address	Transaction ID: SA11AI.80001
	City State Zip Code	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

B.	Full Name (Last, First, Middle Initial) M Gayle Sauer	Date of Receipt MM / DD / YYYY 09 / 25 / 2009
	Mailing Address	Transaction ID: SA11AI.80169
	City State Zip Code	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00

C.	Full Name (Last, First, Middle Initial) M Gayle Sauer	Date of Receipt MM / DD / YYYY 10 / 09 / 2009
	Mailing Address	Transaction ID: SA11AI.80335
	City State Zip Code	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00

SUBTOTAL of Receipts This Page (optional)	▶	90.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 324 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) M Gayle Sauer		Date of Receipt MM / DD / YYYY 10 / 23 / 2009
Mailing Address		Transaction ID: SA11AI.80502
City State Zip Code		Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C	Occupation	
Name of Employer BCBSNC	Aggregate Year-to-Date ▼ 390.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) M Gayle Sauer		Date of Receipt MM / DD / YYYY 11 / 06 / 2009
Mailing Address		Transaction ID: SA11AI.80669
City State Zip Code		Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C	Occupation	
Name of Employer BCBSNC	Aggregate Year-to-Date ▼ 420.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) M Gayle Sauer		Date of Receipt MM / DD / YYYY 11 / 20 / 2009
Mailing Address		Transaction ID: SA11AI.80836
City State Zip Code		Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C	Occupation	
Name of Employer BCBSNC	Aggregate Year-to-Date ▼ 450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	90.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 325 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) M Gayle Sauer	Date of Receipt MM / DD / YYYY 12 / 04 / 2009
	Mailing Address	Transaction ID: SA11AI.81003
	City State Zip Code	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00	

B.	Full Name (Last, First, Middle Initial) M Gayle Sauer	Date of Receipt MM / DD / YYYY 12 / 18 / 2009
	Mailing Address	Transaction ID: SA11AI.81668
	City State Zip Code	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 510.00	

C.	Full Name (Last, First, Middle Initial) M Gayle Sauer	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address	Transaction ID: SA11AI.81335
	City State Zip Code	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 540.00	

SUBTOTAL of Receipts This Page (optional)	▶	90.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 326 / 394
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mike Serozi	Date of Receipt MM / DD / YYYY 07 / 02 / 2009
	Mailing Address 128 Lochwood Dr. West	Transaction ID: SA11AI.79160
	City State Zip Code Cary NC 27511	Amount of Each Receipt this Period 46.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Resource/Technical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 643.92	

B.	Full Name (Last, First, Middle Initial) Mike Serozi	Date of Receipt MM / DD / YYYY 07 / 17 / 2009
	Mailing Address 128 Lochwood Dr. West	Transaction ID: SA11AI.79330
	City State Zip Code Cary NC 27511	Amount of Each Receipt this Period 46.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Resource/Technical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 690.40	

C.	Full Name (Last, First, Middle Initial) Mike Serozi	Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 128 Lochwood Dr. West	Transaction ID: SA11AI.79500
	City State Zip Code Cary NC 27511	Amount of Each Receipt this Period 46.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Resource/Technical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 736.88	

SUBTOTAL of Receipts This Page (optional)	▶	139.44
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 327 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mike Serozi		Date of Receipt MM / DD / YYYY 08 / 14 / 2009		
	Mailing Address 128 Lochwood Dr. West		Transaction ID: SA11AI.79668		
	City Cary	State NC	Zip Code 27511	Amount of Each Receipt this Period 46.48	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Resource/Technical Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 783.36			

B.	Full Name (Last, First, Middle Initial) Mike Serozi		Date of Receipt MM / DD / YYYY 08 / 28 / 2009		
	Mailing Address 128 Lochwood Dr. West		Transaction ID: SA11AI.79835		
	City Cary	State NC	Zip Code 27511	Amount of Each Receipt this Period 46.48	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Resource/Technical Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 829.84			

C.	Full Name (Last, First, Middle Initial) Mike Serozi		Date of Receipt MM / DD / YYYY 09 / 11 / 2009		
	Mailing Address 128 Lochwood Dr. West		Transaction ID: SA11AI.80003		
	City Cary	State NC	Zip Code 27511	Amount of Each Receipt this Period 46.48	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Resource/Technical Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 876.32			

SUBTOTAL of Receipts This Page (optional)	▶	139.44
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 328 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Mike Serozi		Date of Receipt MM / DD / YYYY 09 / 25 / 2009
Mailing Address 128 Lochwood Dr. West		Transaction ID: SA11AI.80171
City Cary	State NC	Zip Code 27511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.48
Name of Employer BCBSNC	Occupation Resource/Technical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 922.80	

B.

Full Name (Last, First, Middle Initial) Mike Serozi		Date of Receipt MM / DD / YYYY 10 / 09 / 2009
Mailing Address 128 Lochwood Dr. West		Transaction ID: SA11AI.80337
City Cary	State NC	Zip Code 27511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.48
Name of Employer BCBSNC	Occupation Resource/Technical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 969.28	

C.

Full Name (Last, First, Middle Initial) Mike Serozi		Date of Receipt MM / DD / YYYY 10 / 23 / 2009
Mailing Address 128 Lochwood Dr. West		Transaction ID: SA11AI.80504
City Cary	State NC	Zip Code 27511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.48
Name of Employer BCBSNC	Occupation Resource/Technical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1015.76	

SUBTOTAL of Receipts This Page (optional)	139.44
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 329 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Mike Serozi		Date of Receipt MM / DD / YYYY 11 / 06 / 2009
Mailing Address 128 Lochwood Dr. West		Transaction ID: SA11AI.80671
City Cary	State NC	Zip Code 27511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.48
Name of Employer BCBSNC	Occupation Resource/Technical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1062.24	

B.

Full Name (Last, First, Middle Initial) Mike Serozi		Date of Receipt MM / DD / YYYY 11 / 20 / 2009
Mailing Address 128 Lochwood Dr. West		Transaction ID: SA11AI.80838
City Cary	State NC	Zip Code 27511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.48
Name of Employer BCBSNC	Occupation Resource/Technical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1108.72	

C.

Full Name (Last, First, Middle Initial) Mike Serozi		Date of Receipt MM / DD / YYYY 12 / 04 / 2009
Mailing Address 128 Lochwood Dr. West		Transaction ID: SA11AI.81005
City Cary	State NC	Zip Code 27511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.48
Name of Employer BCBSNC	Occupation Resource/Technical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1155.20	

SUBTOTAL of Receipts This Page (optional)	▶	139.44
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 330 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Mike Serozi		Date of Receipt MM / DD / YYYY 12 / 18 / 2009
Mailing Address 128 Lochwood Dr. West		Transaction ID: SA11AI.81670
City Cary	State NC	Zip Code 27511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.48
Name of Employer BCBSNC	Occupation Resource/Technical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1201.68	

B.

Full Name (Last, First, Middle Initial) Mike Serozi		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 128 Lochwood Dr. West		Transaction ID: SA11AI.81337
City Cary	State NC	Zip Code 27511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.48
Name of Employer BCBSNC	Occupation Resource/Technical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1248.16	

C.

Full Name (Last, First, Middle Initial) E Ronald Smith		Date of Receipt MM / DD / YYYY 07 / 02 / 2009
Mailing Address 34 Forked Pine Ct		Transaction ID: SA11AI.79162
City Chapel Hill	State NC	Zip Code 27517
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1046.13	

SUBTOTAL of Receipts This Page (optional)	169.88
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 331 / 394

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
E Ronald Smith

Mailing Address 34 Forked Pine Ct

City State Zip Code
Chapel Hill NC 27517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1123.05

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	0	9

Transaction ID: SA11AI.79332

Amount of Each Receipt this Period

76.92

B.

Full Name (Last, First, Middle Initial)
E Ronald Smith

Mailing Address 34 Forked Pine Ct

City State Zip Code
Chapel Hill NC 27517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1199.97

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	0	9

Transaction ID: SA11AI.79502

Amount of Each Receipt this Period

76.92

C.

Full Name (Last, First, Middle Initial)
E Ronald Smith

Mailing Address 34 Forked Pine Ct

City State Zip Code
Chapel Hill NC 27517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1276.89

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	0	9

Transaction ID: SA11AI.79670

Amount of Each Receipt this Period

76.92

SUBTOTAL of Receipts This Page (optional) ▶

230.76

TOTAL This Period (last page this line number only) ▶

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 332 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) E Ronald Smith		Date of Receipt MM / DD / YYYY 08 / 28 / 2009
Mailing Address 34 Forked Pine Ct		Transaction ID: SA11AI.79837
City Chapel Hill	State NC	Zip Code 27517
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1353.81	

B.

Full Name (Last, First, Middle Initial) E Ronald Smith		Date of Receipt MM / DD / YYYY 09 / 11 / 2009
Mailing Address 34 Forked Pine Ct		Transaction ID: SA11AI.80005
City Chapel Hill	State NC	Zip Code 27517
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1430.73	

C.

Full Name (Last, First, Middle Initial) E Ronald Smith		Date of Receipt MM / DD / YYYY 09 / 25 / 2009
Mailing Address 34 Forked Pine Ct		Transaction ID: SA11AI.80173
City Chapel Hill	State NC	Zip Code 27517
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1507.65	

SUBTOTAL of Receipts This Page (optional)	230.76
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 333 / 394

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

E Ronald Smith

Mailing Address 34 Forked Pine Ct

City State Zip Code
Chapel Hill NC 27517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1584.57

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.80340

Amount of Each Receipt this Period

76.92

B.

Full Name (Last, First, Middle Initial)

E Ronald Smith

Mailing Address 34 Forked Pine Ct

City State Zip Code
Chapel Hill NC 27517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1661.49

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.80507

Amount of Each Receipt this Period

76.92

C.

Full Name (Last, First, Middle Initial)

E Ronald Smith

Mailing Address 34 Forked Pine Ct

City State Zip Code
Chapel Hill NC 27517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1738.41

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.80674

Amount of Each Receipt this Period

76.92

SUBTOTAL of Receipts This Page (optional)

230.76

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 334 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) E Ronald Smith		Date of Receipt MM / DD / YYYY 11 / 20 / 2009		
	Mailing Address 34 Forked Pine Ct		Transaction ID: SA11AI.80841		
	City Chapel Hill	State NC	Zip Code 27517	Amount of Each Receipt this Period 76.92	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1815.33		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) E Ronald Smith		Date of Receipt MM / DD / YYYY 12 / 04 / 2009		
	Mailing Address 34 Forked Pine Ct		Transaction ID: SA11AI.81008		
	City Chapel Hill	State NC	Zip Code 27517	Amount of Each Receipt this Period 76.92	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1892.25		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) E Ronald Smith		Date of Receipt MM / DD / YYYY 12 / 18 / 2009		
	Mailing Address 34 Forked Pine Ct		Transaction ID: SA11AI.81673		
	City Chapel Hill	State NC	Zip Code 27517	Amount of Each Receipt this Period 76.92	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1969.17		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	▶	230.76
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 335 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) E Ronald Smith	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 34 Forked Pine Ct	Transaction ID: SA11AI.81340
	City State Zip Code Chapel Hill NC 27517	Amount of Each Receipt this Period 76.92
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 2046.09	

B.	Full Name (Last, First, Middle Initial) William Smith	Date of Receipt MM / DD / YYYY 07 / 02 / 2009
	Mailing Address 303 Lynden Valley Court	Transaction ID: SA11AI.79164
	City State Zip Code Cary NC 27519	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 280.00	

C.	Full Name (Last, First, Middle Initial) William Smith	Date of Receipt MM / DD / YYYY 07 / 17 / 2009
	Mailing Address 303 Lynden Valley Court	Transaction ID: SA11AI.79334
	City State Zip Code Cary NC 27519	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional)	116.92
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 336 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
William Smith
 Mailing Address 303 Lynden Valley Court
 City Cary State NC Zip Code 27519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00
 Date of Receipt 07 / 31 / 2009
Transaction ID: SA11AI.79504
 Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
William Smith
 Mailing Address 303 Lynden Valley Court
 City Cary State NC Zip Code 27519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00
 Date of Receipt 08 / 14 / 2009
Transaction ID: SA11AI.79672
 Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
William Smith
 Mailing Address 303 Lynden Valley Court
 City Cary State NC Zip Code 27519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00
 Date of Receipt 08 / 28 / 2009
Transaction ID: SA11AI.79839
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 337 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
William Smith
 Mailing Address 303 Lynden Valley Court
 City Cary State NC Zip Code 27519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00
 Date of Receipt 09 / 11 / 2009
Transaction ID: SA11AI.80007
 Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
William Smith
 Mailing Address 303 Lynden Valley Court
 City Cary State NC Zip Code 27519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00
 Date of Receipt 09 / 25 / 2009
Transaction ID: SA11AI.80175
 Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
William Smith
 Mailing Address 303 Lynden Valley Court
 City Cary State NC Zip Code 27519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00
 Date of Receipt 10 / 09 / 2009
Transaction ID: SA11AI.80342
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 338 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) William Smith		Date of Receipt MM / DD / YYYY 10 / 23 / 2009
Mailing Address 303 Lynden Valley Court		Transaction ID: SA11AI.80509
City Cary	State NC	Zip Code 27519
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

B.

Full Name (Last, First, Middle Initial) William Smith		Date of Receipt MM / DD / YYYY 11 / 06 / 2009
Mailing Address 303 Lynden Valley Court		Transaction ID: SA11AI.80676
City Cary	State NC	Zip Code 27519
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

C.

Full Name (Last, First, Middle Initial) William Smith		Date of Receipt MM / DD / YYYY 11 / 20 / 2009
Mailing Address 303 Lynden Valley Court		Transaction ID: SA11AI.80843
City Cary	State NC	Zip Code 27519
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

SUBTOTAL of Receipts This Page (optional)	▶	60.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 339 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) William Smith		Date of Receipt MM / DD / YYYY 12 / 04 / 2009
Mailing Address 303 Lynden Valley Court		Transaction ID: SA11AI.81010
City Cary	State NC	Zip Code 27519
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) William Smith		Date of Receipt MM / DD / YYYY 12 / 18 / 2009
Mailing Address 303 Lynden Valley Court		Transaction ID: SA11AI.81675
City Cary	State NC	Zip Code 27519
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

C.

Full Name (Last, First, Middle Initial) William Smith		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 303 Lynden Valley Court		Transaction ID: SA11AI.81342
City Cary	State NC	Zip Code 27519
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

SUBTOTAL of Receipts This Page (optional)	60.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 340 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mark Stinneford

Mailing Address 104 Aborfield Court

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 10 / 09 / 2009
Transaction ID: SA11AI.80344
 Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Mark Stinneford

Mailing Address 104 Aborfield Court

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 10 / 23 / 2009
Transaction ID: SA11AI.80511
 Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial)
Mark Stinneford

Mailing Address 104 Aborfield Court

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 06 / 2009
Transaction ID: SA11AI.80678
 Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 341 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mark Stinneford

Mailing Address 104 Aborfield Court

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.80845

Amount of Each Receipt this Period
 10.00

B.

Full Name (Last, First, Middle Initial)
Mark Stinneford

Mailing Address 104 Aborfield Court

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.81012

Amount of Each Receipt this Period
 10.00

C.

Full Name (Last, First, Middle Initial)
Mark Stinneford

Mailing Address 104 Aborfield Court

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81677

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 342 / 394
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mark Stinneford	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 104 Aborfield Court	Transaction ID: SA11AI.81344
	City State Zip Code Cary NC 27513	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 270.00	

B.	Full Name (Last, First, Middle Initial) Richard Supinski	Date of Receipt MM / DD / YYYY 07 / 02 / 2009
	Mailing Address 2610 Lochmore Drive	Transaction ID: SA11AI.79172
	City State Zip Code Raleigh NC 27608	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 420.00	

C.	Full Name (Last, First, Middle Initial) Richard Supinski	Date of Receipt MM / DD / YYYY 07 / 17 / 2009
	Mailing Address 2610 Lochmore Drive	Transaction ID: SA11AI.79342
	City State Zip Code Raleigh NC 27608	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 450.00	

SUBTOTAL of Receipts This Page (optional)	70.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 343 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Richard Supinski		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
Mailing Address 2610 Lochmore Drive		Transaction ID: SA11AI.79511
City Raleigh	State NC	Zip Code 27608
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

B.

Full Name (Last, First, Middle Initial) Richard Supinski		Date of Receipt MM / DD / YYYY 08 / 14 / 2009
Mailing Address 2610 Lochmore Drive		Transaction ID: SA11AI.79679
City Raleigh	State NC	Zip Code 27608
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	

C.

Full Name (Last, First, Middle Initial) Richard Supinski		Date of Receipt MM / DD / YYYY 08 / 28 / 2009
Mailing Address 2610 Lochmore Drive		Transaction ID: SA11AI.79846
City Raleigh	State NC	Zip Code 27608
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

SUBTOTAL of Receipts This Page (optional)	▶	90.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 344 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Richard Supinski		Date of Receipt MM / DD / YYYY 09 / 11 / 2009
Mailing Address 2610 Lochmore Drive		Transaction ID: SA11AI.80014
City Raleigh	State NC	Zip Code 27608
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 570.00	

B.

Full Name (Last, First, Middle Initial) Richard Supinski		Date of Receipt MM / DD / YYYY 09 / 25 / 2009
Mailing Address 2610 Lochmore Drive		Transaction ID: SA11AI.80182
City Raleigh	State NC	Zip Code 27608
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

C.

Full Name (Last, First, Middle Initial) Richard Supinski		Date of Receipt MM / DD / YYYY 10 / 09 / 2009
Mailing Address 2610 Lochmore Drive		Transaction ID: SA11AI.80349
City Raleigh	State NC	Zip Code 27608
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

SUBTOTAL of Receipts This Page (optional)	90.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 345 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Richard Supinski
Mailing Address 2610 Lochmore Drive
City Raleigh State NC Zip Code 27608
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 660.00
Date of Receipt 10 / 23 / 2009
Transaction ID: SA11AI.80516
Amount of Each Receipt this Period 30.00

B. Full Name (Last, First, Middle Initial)
Richard Supinski
Mailing Address 2610 Lochmore Drive
City Raleigh State NC Zip Code 27608
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 690.00
Date of Receipt 11 / 06 / 2009
Transaction ID: SA11AI.80683
Amount of Each Receipt this Period 30.00

C. Full Name (Last, First, Middle Initial)
Richard Supinski
Mailing Address 2610 Lochmore Drive
City Raleigh State NC Zip Code 27608
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 720.00
Date of Receipt 11 / 20 / 2009
Transaction ID: SA11AI.80850
Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 346 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Richard Supinski

Mailing Address 2610 Lochmore Drive

City Raleigh State NC Zip Code 27608

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 12 / 04 / 2009
Transaction ID: SA11AI.81017
 Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial)
Richard Supinski

Mailing Address 2610 Lochmore Drive

City Raleigh State NC Zip Code 27608

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt: 12 / 18 / 2009
Transaction ID: SA11AI.81682
 Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
Richard Supinski

Mailing Address 2610 Lochmore Drive

City Raleigh State NC Zip Code 27608

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 810.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: SA11AI.81349
 Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 347 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
728.98

Date of Receipt
MM / DD / YYYY
07 / 02 / 2009

Transaction ID: SA11AI.79173

Amount of Each Receipt this Period
52.07

B.

Full Name (Last, First, Middle Initial)
Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
781.05

Date of Receipt
MM / DD / YYYY
07 / 17 / 2009

Transaction ID: SA11AI.79343

Amount of Each Receipt this Period
52.07

C.

Full Name (Last, First, Middle Initial)
Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
833.12

Date of Receipt
MM / DD / YYYY
07 / 31 / 2009

Transaction ID: SA11AI.79512

Amount of Each Receipt this Period
52.07

SUBTOTAL of Receipts This Page (optional) ► **156.21**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 348 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
885.19

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	4	/	2	0	0	9

Transaction ID: SA11AI.79680

Amount of Each Receipt this Period
52.07

B. Full Name (Last, First, Middle Initial)
Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
937.26

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	8	/	2	0	0	9

Transaction ID: SA11AI.79847

Amount of Each Receipt this Period
52.07

C. Full Name (Last, First, Middle Initial)
Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
989.33

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	1	/	2	0	0	9

Transaction ID: SA11AI.80015

Amount of Each Receipt this Period
52.07

SUBTOTAL of Receipts This Page (optional) ► **156.21**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 349 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1041.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	9

Transaction ID: SA11AI.80183

Amount of Each Receipt this Period
52.07

B. Full Name (Last, First, Middle Initial)
Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1093.47

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	9	/	2	0	0	9

Transaction ID: SA11AI.80350

Amount of Each Receipt this Period
52.07

C. Full Name (Last, First, Middle Initial)
Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1145.54

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	9

Transaction ID: SA11AI.80517

Amount of Each Receipt this Period
52.07

SUBTOTAL of Receipts This Page (optional) ► **156.21**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 350 / 394
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mrs. Carol Sutton		Date of Receipt MM / DD / YYYY 11 / 06 / 2009		
	Mailing Address 22101 Spring Meadow Dr.		Transaction ID: SA11AI.80684		
	City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 52.07	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1197.61		
	Name of Employer BCBSNC	Occupation VP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.	Full Name (Last, First, Middle Initial) Mrs. Carol Sutton		Date of Receipt MM / DD / YYYY 11 / 20 / 2009		
	Mailing Address 22101 Spring Meadow Dr.		Transaction ID: SA11AI.80851		
	City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 52.07	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1249.68		
	Name of Employer BCBSNC	Occupation VP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.	Full Name (Last, First, Middle Initial) Mrs. Carol Sutton		Date of Receipt MM / DD / YYYY 12 / 04 / 2009		
	Mailing Address 22101 Spring Meadow Dr.		Transaction ID: SA11AI.81018		
	City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 52.07	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1301.75		
	Name of Employer BCBSNC	Occupation VP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	156.21
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 351 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1353.82

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 18 / 2009

Transaction ID: SA11AI.81683

Amount of Each Receipt this Period
52.07

B.

Full Name (Last, First, Middle Initial)
Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1405.89

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2009

Transaction ID: SA11AI.81350

Amount of Each Receipt this Period
52.07

C.

Full Name (Last, First, Middle Initial)
A Cynthia Troxler

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 02 / 2009

Transaction ID: SA11AI.79176

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **124.14**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 352 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
A Cynthia Troxler

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 17 / 2009

Transaction ID: SA11AI.79346

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
A Cynthia Troxler

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 31 / 2009

Transaction ID: SA11AI.79515

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
A Cynthia Troxler

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 14 / 2009

Transaction ID: SA11AI.79683

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **60.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 353 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) A Cynthia Troxler	Date of Receipt MM / DD / YYYY 08 / 28 / 2009
	Mailing Address	Transaction ID: SA11AI.79850
	City State Zip Code	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

B.	Full Name (Last, First, Middle Initial) A Cynthia Troxler	Date of Receipt MM / DD / YYYY 09 / 11 / 2009
	Mailing Address	Transaction ID: SA11AI.80018
	City State Zip Code	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

C.	Full Name (Last, First, Middle Initial) A Cynthia Troxler	Date of Receipt MM / DD / YYYY 09 / 25 / 2009
	Mailing Address	Transaction ID: SA11AI.80186
	City State Zip Code	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	60.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 354 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) A Cynthia Troxler		Date of Receipt MM / DD / YYYY 10 / 09 / 2009
Mailing Address		Transaction ID: SA11AI.80353
City State Zip Code		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

B.

Full Name (Last, First, Middle Initial) A Cynthia Troxler		Date of Receipt MM / DD / YYYY 10 / 23 / 2009
Mailing Address		Transaction ID: SA11AI.80520
City State Zip Code		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

C.

Full Name (Last, First, Middle Initial) A Cynthia Troxler		Date of Receipt MM / DD / YYYY 11 / 06 / 2009
Mailing Address		Transaction ID: SA11AI.80687
City State Zip Code		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

SUBTOTAL of Receipts This Page (optional)	60.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 355 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) A Cynthia Troxler	Date of Receipt MM / DD / YYYY 11 / 20 / 2009
	Mailing Address	Transaction ID: SA11AI.80854
	City State Zip Code	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

B.	Full Name (Last, First, Middle Initial) A Cynthia Troxler	Date of Receipt MM / DD / YYYY 12 / 04 / 2009
	Mailing Address	Transaction ID: SA11AI.81021
	City State Zip Code	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) A Cynthia Troxler	Date of Receipt MM / DD / YYYY 12 / 18 / 2009
	Mailing Address	Transaction ID: SA11AI.81686
	City State Zip Code	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

SUBTOTAL of Receipts This Page (optional)	60.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 356 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) A Cynthia Troxler		Date of Receipt
Mailing Address		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
City	State	Zip Code
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: SA11AI.81353
Name of Employer BCBSNC		Amount of Each Receipt this Period
Occupation VP		<input type="text" value="20.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="540.00"/>	
<input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Jeanne Wallander		Date of Receipt
Mailing Address 3404 Bluet Ct		<input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
City	State	Zip Code
Holly Springs	NC	27540
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: SA11AI.79179
Name of Employer BCBSNC		Amount of Each Receipt this Period
Occupation VP		<input type="text" value="40.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="560.00"/>	
<input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Jeanne Wallander		Date of Receipt
Mailing Address 3404 Bluet Ct		<input type="text" value="07"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
City	State	Zip Code
Holly Springs	NC	27540
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: SA11AI.79349
Name of Employer BCBSNC		Amount of Each Receipt this Period
Occupation VP		<input type="text" value="40.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="100.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 357 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jeanne Wallander		Date of Receipt
	Mailing Address 3404 Bluet Ct		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Holly Springs	NC	27540
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation VP	Transaction ID: SA11AI.79518
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="640.00"/>	<input type="text" value="40.00"/>

B.	Full Name (Last, First, Middle Initial) Jeanne Wallander		Date of Receipt
	Mailing Address 3404 Bluet Ct		<input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Holly Springs	NC	27540
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation VP	Transaction ID: SA11AI.79686
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="680.00"/>	<input type="text" value="40.00"/>

C.	Full Name (Last, First, Middle Initial) Jeanne Wallander		Date of Receipt
	Mailing Address 3404 Bluet Ct		<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Holly Springs	NC	27540
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation VP	Transaction ID: SA11AI.79853
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="720.00"/>	<input type="text" value="40.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="120.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 358 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Jeanne Wallander

Mailing Address 3404 Bluet Ct

City State Zip Code
Holly Springs NC 27540

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
760.00

Date of Receipt
MM / DD / YYYY
09 / 11 / 2009

Transaction ID: SA11AI.80021

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Jeanne Wallander

Mailing Address 3404 Bluet Ct

City State Zip Code
Holly Springs NC 27540

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
MM / DD / YYYY
09 / 25 / 2009

Transaction ID: SA11AI.80189

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
Jeanne Wallander

Mailing Address 3404 Bluet Ct

City State Zip Code
Holly Springs NC 27540

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
840.00

Date of Receipt
MM / DD / YYYY
10 / 09 / 2009

Transaction ID: SA11AI.80356

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **120.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 359 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jeanne Wallander		Date of Receipt
	Mailing Address 3404 Bluet Ct		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 2 3 / 2 0 0 9
	City	State	Zip Code
	Holly Springs	NC	27540
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80523
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 880.00	<input type="text"/> 40.00

B.	Full Name (Last, First, Middle Initial) Jeanne Wallander		Date of Receipt
	Mailing Address 3404 Bluet Ct		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 0 6 / 2 0 0 9
	City	State	Zip Code
	Holly Springs	NC	27540
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80690
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 920.00	<input type="text"/> 40.00

C.	Full Name (Last, First, Middle Initial) Jeanne Wallander		Date of Receipt
	Mailing Address 3404 Bluet Ct		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 0 / 2 0 0 9
	City	State	Zip Code
	Holly Springs	NC	27540
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80857
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 960.00	<input type="text"/> 40.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 120.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 360 / 394		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jeanne Wallander		Date of Receipt MM / DD / YYYY 12 / 04 / 2009		
	Mailing Address 3404 Bluet Ct		Transaction ID: SA11AI.81024		
	City Holly Springs	State NC	Zip Code 27540	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1000.00		

B.	Full Name (Last, First, Middle Initial) Jeanne Wallander		Date of Receipt MM / DD / YYYY 12 / 18 / 2009		
	Mailing Address 3404 Bluet Ct		Transaction ID: SA11AI.81689		
	City Holly Springs	State NC	Zip Code 27540	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1040.00		

C.	Full Name (Last, First, Middle Initial) Jeanne Wallander		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 3404 Bluet Ct		Transaction ID: SA11AI.81356		
	City Holly Springs	State NC	Zip Code 27540	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1080.00		

SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 361 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dionne Wells

Mailing Address 9228 Cornwell Dr

City State Zip Code
Wake Forest NC 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.80359

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Dionne Wells

Mailing Address 9228 Cornwell Dr

City State Zip Code
Wake Forest NC 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.80526

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Dionne Wells

Mailing Address 9228 Cornwell Dr

City State Zip Code
Wake Forest NC 27587

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.80693

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 362 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Dionne Wells		Date of Receipt
	Mailing Address 9228 Cornwell Dr		<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Wake Forest	NC	27587
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80860
Name of Employer BCBSNC		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="10.00"/>
		<input type="text" value="240.00"/>	

B.	Full Name (Last, First, Middle Initial) Dionne Wells		Date of Receipt
	Mailing Address 9228 Cornwell Dr		<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Wake Forest	NC	27587
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.81027
Name of Employer BCBSNC		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="10.00"/>
		<input type="text" value="250.00"/>	

C.	Full Name (Last, First, Middle Initial) Dionne Wells		Date of Receipt
	Mailing Address 9228 Cornwell Dr		<input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Wake Forest	NC	27587
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.81692
Name of Employer BCBSNC		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="10.00"/>
		<input type="text" value="260.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="30.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 363 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Dionne Wells		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 9228 Cornwell Dr		Transaction ID: SA11AI.81359		
	City Wake Forest	State NC	Zip Code 27587	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 270.00		
Name of Employer BCBSNC		Occupation Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Kimberly Whiteurs		Date of Receipt MM / DD / YYYY 07 / 02 / 2009		
	Mailing Address 3008 Cardinal Lake Dr		Transaction ID: SA11AI.79183		
	City Durham	State NC	Zip Code 27704	Amount of Each Receipt this Period 16.37	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 226.03		
Name of Employer BCBSNC		Occupation Senior Business Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Kimberly Whiteurs		Date of Receipt MM / DD / YYYY 07 / 17 / 2009		
	Mailing Address 3008 Cardinal Lake Dr		Transaction ID: SA11AI.79353		
	City Durham	State NC	Zip Code 27704	Amount of Each Receipt this Period 16.37	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 242.40		
Name of Employer BCBSNC		Occupation Senior Business Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional) ► **42.74**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 364 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Kimberly Whiteurs		Date of Receipt MM / DD / YYYY 07 / 31 / 2009
Mailing Address 3008 Cardinal Lake Dr		Transaction ID: SA11AI.79522
City Durham	State NC	Zip Code 27704
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.37
Name of Employer BCBSNC	Occupation Senior Business Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 258.77	

B.

Full Name (Last, First, Middle Initial) Kimberly Whiteurs		Date of Receipt MM / DD / YYYY 08 / 14 / 2009
Mailing Address 3008 Cardinal Lake Dr		Transaction ID: SA11AI.79690
City Durham	State NC	Zip Code 27704
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.37
Name of Employer BCBSNC	Occupation Senior Business Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.14	

C.

Full Name (Last, First, Middle Initial) Kimberly Whiteurs		Date of Receipt MM / DD / YYYY 08 / 28 / 2009
Mailing Address 3008 Cardinal Lake Dr		Transaction ID: SA11AI.79857
City Durham	State NC	Zip Code 27704
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.37
Name of Employer BCBSNC	Occupation Senior Business Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.51	

SUBTOTAL of Receipts This Page (optional)	▶	49.11
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 365 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Kimberly Whiteurs

Mailing Address 3008 Cardinal Lake Dr

City State Zip Code
Durham NC 27704

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Senior Business Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 307.88

Date of Receipt
MM / DD / YYYY
09 / 11 / 2009

Transaction ID: SA11AI.80025

Amount of Each Receipt this Period
16.37

B.

Full Name (Last, First, Middle Initial)
Kimberly Whiteurs

Mailing Address 3008 Cardinal Lake Dr

City State Zip Code
Durham NC 27704

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Senior Business Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 324.25

Date of Receipt
MM / DD / YYYY
09 / 25 / 2009

Transaction ID: SA11AI.80193

Amount of Each Receipt this Period
16.37

C.

Full Name (Last, First, Middle Initial)
Kimberly Whiteurs

Mailing Address 3008 Cardinal Lake Dr

City State Zip Code
Durham NC 27704

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Senior Business Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.62

Date of Receipt
MM / DD / YYYY
10 / 09 / 2009

Transaction ID: SA11AI.80360

Amount of Each Receipt this Period
16.37

SUBTOTAL of Receipts This Page (optional) ► **49.11**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 366 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Kimberly Whiteurs

Mailing Address 3008 Cardinal Lake Dr

City State Zip Code
Durham NC 27704

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Senior Business Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 356.99

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.80527

Amount of Each Receipt this Period
16.37

B.

Full Name (Last, First, Middle Initial)
Kimberly Whiteurs

Mailing Address 3008 Cardinal Lake Dr

City State Zip Code
Durham NC 27704

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Senior Business Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 373.36

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.80694

Amount of Each Receipt this Period
16.37

C.

Full Name (Last, First, Middle Initial)
Kimberly Whiteurs

Mailing Address 3008 Cardinal Lake Dr

City State Zip Code
Durham NC 27704

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Senior Business Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 389.73

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.80861

Amount of Each Receipt this Period
16.37

SUBTOTAL of Receipts This Page (optional) ► 49.11

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 367 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kimberly Whiteurs		Date of Receipt
	Mailing Address 3008 Cardinal Lake Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Durham	NC	27704
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.81028
Name of Employer BCBSNC		Occupation Senior Business Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 16.37
		<input type="text"/> 406.10	

B.	Full Name (Last, First, Middle Initial) Kimberly Whiteurs		Date of Receipt
	Mailing Address 3008 Cardinal Lake Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Durham	NC	27704
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.81694
Name of Employer BCBSNC		Occupation Senior Business Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 16.37
		<input type="text"/> 422.47	

C.	Full Name (Last, First, Middle Initial) Kimberly Whiteurs		Date of Receipt
	Mailing Address 3008 Cardinal Lake Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Durham	NC	27704
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.81360
Name of Employer BCBSNC		Occupation Senior Business Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 16.37
		<input type="text"/> 438.84	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 49.11
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 368 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. James Wilson

Mailing Address 227 Midenhall Way

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2692.20

Date of Receipt: 07 / 02 / 2009
Transaction ID: SA11AI.79185
 Amount of Each Receipt this Period: 192.30

B. Full Name (Last, First, Middle Initial)
Mr. James Wilson

Mailing Address 227 Midenhall Way

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2884.50

Date of Receipt: 07 / 17 / 2009
Transaction ID: SA11AI.79355
 Amount of Each Receipt this Period: 192.30

C. Full Name (Last, First, Middle Initial)
Mr. James Wilson

Mailing Address 227 Midenhall Way

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3076.80

Date of Receipt: 07 / 31 / 2009
Transaction ID: SA11AI.79524
 Amount of Each Receipt this Period: 192.30

SUBTOTAL of Receipts This Page (optional) ► 576.90

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 369 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. James Wilson

Mailing Address 227 Midenhall Way

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3269.10

Date of Receipt: 08 / 14 / 2009
Transaction ID: SA11AI.79692
 Amount of Each Receipt this Period: 192.30

B. Full Name (Last, First, Middle Initial)
Mr. James Wilson

Mailing Address 227 Midenhall Way

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3461.40

Date of Receipt: 08 / 28 / 2009
Transaction ID: SA11AI.79859
 Amount of Each Receipt this Period: 192.30

C. Full Name (Last, First, Middle Initial)
Mr. James Wilson

Mailing Address 227 Midenhall Way

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3653.70

Date of Receipt: 09 / 11 / 2009
Transaction ID: SA11AI.80027
 Amount of Each Receipt this Period: 192.30

SUBTOTAL of Receipts This Page (optional) ► 576.90

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 370 / 394						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. James Wilson		Date of Receipt		
	Mailing Address 227 Midenhall Way		M M / D D / Y Y Y Y Y 09 / 25 / 2009		
	City	State	Zip Code	Transaction ID: SA11AI.80195	
	Cary	NC	27513	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		C	192.30	
	Name of Employer BCBSNC		Occupation SVP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		Aggregate Year-to-Date ▼	3846.00		

B.	Full Name (Last, First, Middle Initial) Mr. James Wilson		Date of Receipt		
	Mailing Address 227 Midenhall Way		M M / D D / Y Y Y Y Y 10 / 09 / 2009		
	City	State	Zip Code	Transaction ID: SA11AI.80362	
	Cary	NC	27513	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		C	192.30	
	Name of Employer BCBSNC		Occupation SVP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		Aggregate Year-to-Date ▼	4038.30		

C.	Full Name (Last, First, Middle Initial) Mr. James Wilson		Date of Receipt		
	Mailing Address 227 Midenhall Way		M M / D D / Y Y Y Y Y 10 / 23 / 2009		
	City	State	Zip Code	Transaction ID: SA11AI.80529	
	Cary	NC	27513	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		C	192.30	
	Name of Employer BCBSNC		Occupation SVP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		Aggregate Year-to-Date ▼	4230.60		

SUBTOTAL of Receipts This Page (optional)	▶	576.90
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 371 / 394
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. James Wilson

Mailing Address 227 Midenhall Way

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4422.90

Date of Receipt 11 / 06 / 2009
Transaction ID: SA11AI.80696
 Amount of Each Receipt this Period 192.30

B. Full Name (Last, First, Middle Initial)
Mr. James Wilson

Mailing Address 227 Midenhall Way

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4615.20

Date of Receipt 11 / 20 / 2009
Transaction ID: SA11AI.80863
 Amount of Each Receipt this Period 192.30

C. Full Name (Last, First, Middle Initial)
Mr. James Wilson

Mailing Address 227 Midenhall Way

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4807.50

Date of Receipt 12 / 04 / 2009
Transaction ID: SA11AI.81030
 Amount of Each Receipt this Period 192.30

SUBTOTAL of Receipts This Page (optional) ► 576.90

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 372 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Mr. James Wilson		Date of Receipt MM / DD / YYYY 12 / 18 / 2009
Mailing Address 227 Midenhall Way		Transaction ID: SA11AI.81696
City Cary	State NC	Zip Code 27513
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4999.80	

B.

Full Name (Last, First, Middle Initial) Mr. James Wilson		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 227 Midenhall Way		Transaction ID: SA11AI.81362
City Cary	State NC	Zip Code 27513
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5192.10	

C.

Full Name (Last, First, Middle Initial) Randy Winslow		Date of Receipt MM / DD / YYYY 09 / 11 / 2009
Mailing Address 1609 Valley Creek Drive		Transaction ID: SA11AI.80028
City Hillsborough	State NC	Zip Code 27278
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.70
Name of Employer BCBSNC	Occupation Business Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.70	

SUBTOTAL of Receipts This Page (optional)	395.30
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 373 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Randy Winslow

Mailing Address 1609 Valley Creek Drive

City Hillsborough State NC Zip Code 27278

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Business Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 213.40

Date of Receipt: 09 / 25 / 2009
Transaction ID: SA11AI.80196
Amount of Each Receipt this Period: 10.70

B.

Full Name (Last, First, Middle Initial)
Randy Winslow

Mailing Address 1609 Valley Creek Drive

City Hillsborough State NC Zip Code 27278

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Business Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.10

Date of Receipt: 10 / 09 / 2009
Transaction ID: SA11AI.80363
Amount of Each Receipt this Period: 10.70

C.

Full Name (Last, First, Middle Initial)
Randy Winslow

Mailing Address 1609 Valley Creek Drive

City Hillsborough State NC Zip Code 27278

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC Occupation Business Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.80

Date of Receipt: 10 / 23 / 2009
Transaction ID: SA11AI.80530
Amount of Each Receipt this Period: 10.70

SUBTOTAL of Receipts This Page (optional) ► 32.10

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 374 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Randy Winslow	Date of Receipt MM / DD / YYYY 11 / 06 / 2009
	Mailing Address 1609 Valley Creek Drive	Transaction ID: SA11AI.80697
	City Hillsborough State NC Zip Code 27278	Amount of Each Receipt this Period 10.70
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Business Analyst	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.50

B.	Full Name (Last, First, Middle Initial) Randy Winslow	Date of Receipt MM / DD / YYYY 11 / 20 / 2009
	Mailing Address 1609 Valley Creek Drive	Transaction ID: SA11AI.80864
	City Hillsborough State NC Zip Code 27278	Amount of Each Receipt this Period 10.70
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Business Analyst	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 256.20

C.	Full Name (Last, First, Middle Initial) Randy Winslow	Date of Receipt MM / DD / YYYY 12 / 04 / 2009
	Mailing Address 1609 Valley Creek Drive	Transaction ID: SA11AI.81031
	City Hillsborough State NC Zip Code 27278	Amount of Each Receipt this Period 10.70
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Business Analyst	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.90

SUBTOTAL of Receipts This Page (optional)	32.10
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 375 / 394
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Randy Winslow	Date of Receipt MM / DD / YYYY 12 / 18 / 2009
	Mailing Address 1609 Valley Creek Drive	Transaction ID: SA11AI.81697
	City Hillsborough State NC Zip Code 27278	Amount of Each Receipt this Period 10.70
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Business Analyst	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.60

B.	Full Name (Last, First, Middle Initial) Randy Winslow	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 1609 Valley Creek Drive	Transaction ID: SA11AI.81363
	City Hillsborough State NC Zip Code 27278	Amount of Each Receipt this Period 10.70
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Business Analyst	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.30

C.	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin	Date of Receipt MM / DD / YYYY 07 / 02 / 2009
	Mailing Address 100 Palmyra Place	Transaction ID: SA11AI.79187
	City Chapel Hill State NC Zip Code 27514	Amount of Each Receipt this Period 95.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1296.75

SUBTOTAL of Receipts This Page (optional)	116.40
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 376 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin		Date of Receipt	
	Mailing Address 100 Palmyra Place		M M / D D / Y Y Y Y Y 07 / 17 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79357
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		95.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1391.75		

B.	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin		Date of Receipt	
	Mailing Address 100 Palmyra Place		M M / D D / Y Y Y Y Y 07 / 31 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79526
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		95.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1486.75		

C.	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin		Date of Receipt	
	Mailing Address 100 Palmyra Place		M M / D D / Y Y Y Y Y 08 / 14 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.79694
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		95.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1581.75		

SUBTOTAL of Receipts This Page (optional)	▶	285.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 377 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin</p> <p>Mailing Address 100 Palmyra Place</p> <p>City State Zip Code Chapel Hill NC 27514</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC Occupation VP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1676.75</p>	<p>Date of Receipt <table border="1" style="width:100%; text-align:center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>8</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p>Transaction ID: SA11AI.79861</p> <p>Amount of Each Receipt this Period 95.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	8		2	0	0	9												

<p>B. Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin</p> <p>Mailing Address 100 Palmyra Place</p> <p>City State Zip Code Chapel Hill NC 27514</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC Occupation VP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1771.75</p>	<p>Date of Receipt <table border="1" style="width:100%; text-align:center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>9</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p>Transaction ID: SA11AI.80029</p> <p>Amount of Each Receipt this Period 95.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	1		2	0	0	9												

<p>C. Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin</p> <p>Mailing Address 100 Palmyra Place</p> <p>City State Zip Code Chapel Hill NC 27514</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC Occupation VP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1866.75</p>	<p>Date of Receipt <table border="1" style="width:100%; text-align:center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>9</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p>Transaction ID: SA11AI.80197</p> <p>Amount of Each Receipt this Period 95.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	5		2	0	0	9												

SUBTOTAL of Receipts This Page (optional)	285.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 378 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin		Date of Receipt
	Mailing Address 100 Palmyra Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer BCBSNC		Occupation VP	Transaction ID: SA11AI.80364
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 1961.75	<input type="text"/> 95.00

B.	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin		Date of Receipt
	Mailing Address 100 Palmyra Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer BCBSNC		Occupation VP	Transaction ID: SA11AI.80531
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 2056.75	<input type="text"/> 95.00

C.	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin		Date of Receipt
	Mailing Address 100 Palmyra Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer BCBSNC		Occupation VP	Transaction ID: SA11AI.80698
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 2151.75	<input type="text"/> 95.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 285.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 379 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin		Date of Receipt
	Mailing Address 100 Palmyra Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 2 0 / 2 0 0 9
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.80865
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 95.00
		<input type="text"/> 2246.75	

B.	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin		Date of Receipt
	Mailing Address 100 Palmyra Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 0 4 / 2 0 0 9
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.81032
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 95.00
		<input type="text"/> 2341.75	

C.	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin		Date of Receipt
	Mailing Address 100 Palmyra Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 1 8 / 2 0 0 9
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.81698
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 95.00
		<input type="text"/> 2436.75	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 285.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 380 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 100 Palmyra Place	Transaction ID: SA11AI.81364
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 95.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 2531.75	

B.	Full Name (Last, First, Middle Initial) Kenneth Wright	Date of Receipt MM / DD / YYYY 07 / 02 / 2009
	Mailing Address 618 S. Wingate Dr.	Transaction ID: SA11AI.79188
	City State Zip Code Wake Forest NC 27587	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 532.00	

C.	Full Name (Last, First, Middle Initial) Kenneth Wright	Date of Receipt MM / DD / YYYY 07 / 17 / 2009
	Mailing Address 618 S. Wingate Dr.	Transaction ID: SA11AI.79358
	City State Zip Code Wake Forest NC 27587	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 570.00	

SUBTOTAL of Receipts This Page (optional)	171.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 381 / 394
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kenneth Wright		Date of Receipt MM / DD / YYYY 07 / 31 / 2009		
	Mailing Address 618 S. Wingate Dr.		Transaction ID: SA11AI.79527		
	City Wake Forest	State NC	Zip Code 27587	Amount of Each Receipt this Period 38.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director	Aggregate Year-to-Date 608.00		

B.	Full Name (Last, First, Middle Initial) Kenneth Wright		Date of Receipt MM / DD / YYYY 08 / 14 / 2009		
	Mailing Address 618 S. Wingate Dr.		Transaction ID: SA11AI.79695		
	City Wake Forest	State NC	Zip Code 27587	Amount of Each Receipt this Period 39.50	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director	Aggregate Year-to-Date 647.50		

C.	Full Name (Last, First, Middle Initial) Kenneth Wright		Date of Receipt MM / DD / YYYY 08 / 28 / 2009		
	Mailing Address 618 S. Wingate Dr.		Transaction ID: SA11AI.79862		
	City Wake Forest	State NC	Zip Code 27587	Amount of Each Receipt this Period 39.50	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director	Aggregate Year-to-Date 687.00		

SUBTOTAL of Receipts This Page (optional)	▶	117.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 382 / 394
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kenneth Wright	Date of Receipt MM / DD / YYYY 09 / 11 / 2009
	Mailing Address 618 S. Wingate Dr.	Transaction ID: SA11AI.80030
	City State Zip Code Wake Forest NC 27587	Amount of Each Receipt this Period 39.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 726.50	

B.	Full Name (Last, First, Middle Initial) Kenneth Wright	Date of Receipt MM / DD / YYYY 09 / 25 / 2009
	Mailing Address 618 S. Wingate Dr.	Transaction ID: SA11AI.80198
	City State Zip Code Wake Forest NC 27587	Amount of Each Receipt this Period 39.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 766.00	

C.	Full Name (Last, First, Middle Initial) Kenneth Wright	Date of Receipt MM / DD / YYYY 10 / 09 / 2009
	Mailing Address 618 S. Wingate Dr.	Transaction ID: SA11AI.80365
	City State Zip Code Wake Forest NC 27587	Amount of Each Receipt this Period 39.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 805.50	

SUBTOTAL of Receipts This Page (optional)	118.50
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 383 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kenneth Wright	Date of Receipt MM / DD / YYYY 10 / 23 / 2009
	Mailing Address 618 S. Wingate Dr.	Transaction ID: SA11AI.80532
	City State Zip Code Wake Forest NC 27587	Amount of Each Receipt this Period 39.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 845.00	

B.	Full Name (Last, First, Middle Initial) Kenneth Wright	Date of Receipt MM / DD / YYYY 11 / 06 / 2009
	Mailing Address 618 S. Wingate Dr.	Transaction ID: SA11AI.80699
	City State Zip Code Wake Forest NC 27587	Amount of Each Receipt this Period 39.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 884.50	

C.	Full Name (Last, First, Middle Initial) Kenneth Wright	Date of Receipt MM / DD / YYYY 11 / 20 / 2009
	Mailing Address 618 S. Wingate Dr.	Transaction ID: SA11AI.80866
	City State Zip Code Wake Forest NC 27587	Amount of Each Receipt this Period 39.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 924.00	

SUBTOTAL of Receipts This Page (optional)	▶	118.50
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 384 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kenneth Wright		Date of Receipt
	Mailing Address 618 S. Wingate Dr.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Wake Forest	NC	27587
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.81033
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 39.50
		<input type="text"/> 963.50	

B.	Full Name (Last, First, Middle Initial) Kenneth Wright		Date of Receipt
	Mailing Address 618 S. Wingate Dr.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Wake Forest	NC	27587
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.81699
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 39.50
		<input type="text"/> 1003.00	

C.	Full Name (Last, First, Middle Initial) Kenneth Wright		Date of Receipt
	Mailing Address 618 S. Wingate Dr.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Wake Forest	NC	27587
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.81365
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 39.50
		<input type="text"/> 1042.50	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 118.50
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 385 / 394
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Scott Zeller	Date of Receipt MM / DD / YYYY 07 / 02 / 2009
	Mailing Address 800 Holly Hedge Dr	Transaction ID: SA11AI.79189
	City Lewisville State NC Zip Code 27023	Amount of Each Receipt this Period 15.99
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation DBA Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 222.76	

B.	Full Name (Last, First, Middle Initial) Scott Zeller	Date of Receipt MM / DD / YYYY 07 / 17 / 2009
	Mailing Address 800 Holly Hedge Dr	Transaction ID: SA11AI.79359
	City Lewisville State NC Zip Code 27023	Amount of Each Receipt this Period 15.99
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation DBA Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 238.75	

C.	Full Name (Last, First, Middle Initial) Scott Zeller	Date of Receipt MM / DD / YYYY 07 / 31 / 2009
	Mailing Address 800 Holly Hedge Dr	Transaction ID: SA11AI.79528
	City Lewisville State NC Zip Code 27023	Amount of Each Receipt this Period 15.99
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation DBA Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 254.74	

SUBTOTAL of Receipts This Page (optional)	47.97
TOTAL This Period (last page this line number only)	59482.51

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 386 / 394

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Hon. Bob Etheridge	Transaction ID: SB23.74585 Date of Disbursement
	Mailing Address P.O. Box 28001	<input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2009"/>
	City Raleigh State NC Zip Code 27611	Amount of Each Disbursement this Period
	Purpose of Disbursement contribution Candidate Name Hon. Bob Etheridge Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1500.00"/>
B.	Full Name (Last, First, Middle Initial) Larry Kissell	Transaction ID: SB23.75434 Date of Disbursement
	Mailing Address PO Box 536	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Biscoe State NC Zip Code 27209	Amount of Each Disbursement this Period
	Purpose of Disbursement contribution Candidate Name Larry Kissell Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2000.00"/>
C.	Full Name (Last, First, Middle Initial) Hon. Mike McIntyre	Transaction ID: SB23.75438 Date of Disbursement
	Mailing Address 218 Federal Building	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Fayetteville State NC Zip Code 28301	Amount of Each Disbursement this Period
	Purpose of Disbursement contribution Candidate Name Hon. Mike McIntyre Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 07 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="4000.00"/>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Hon. Mike McIntyre

Mailing Address 218 Federal Building

City Fayetteville State NC Zip Code 28301

Purpose of Disbursement contribution

Candidate Name
Hon. Mike McIntyre

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: NC District: 07

Transaction ID: SB23.75439

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
Sen. Brad Miller

Mailing Address 200-301 Calibre Chase Dr.

City Raleigh State NC Zip Code 27609

Purpose of Disbursement contribution

Candidate Name
Sen. Brad Miller

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: NC District: 13

Transaction ID: SB23.74583

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
Hon. Sue Myrick

Mailing Address 9169 Bonnie Briar Cir.

City Charlotte State NC Zip Code 28277

Purpose of Disbursement contribution

Candidate Name
Hon. Sue Myrick

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: NC District: 09

Transaction ID: SB23.74584

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 388 / 394

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Heath Shuler

Mailing Address

City

State

Zip Code

Purpose of Disbursement
contribution

Candidate Name
Heath Shuler

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NC District: 11

Transaction ID: SB23.74587

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

13500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Robert Greczyn	Transaction ID: SB28A.81702 Date of Disbursement 12 / 31 / 2009
	Mailing Address 113 Richelieu Dr.	Amount of Each Disbursement this Period 192.10
	City Cary State NC Zip Code 27511	
	Purpose of Disbursement Refund of Individual Contribution	
	Candidate Name Blue Cross and Blue Shield of North Carolina Employee Political Action Committee	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Maureen O'Connor	Transaction ID: SB28A.81704 Date of Disbursement 12 / 31 / 2009
	Mailing Address 104 Beeston Ct.	Amount of Each Disbursement this Period 192.10
	City Morrisville State NC Zip Code 27560	
	Purpose of Disbursement Refund of Individual Contribution	
	Candidate Name Blue Cross and Blue Shield of North Carolina Employee Political Action Committee	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Mr. John Roos	Transaction ID: SB28A.81700 Date of Disbursement 12 / 31 / 2009
	Mailing Address 119 Draymore Way	Amount of Each Disbursement this Period 192.10
	City Morrisville State NC Zip Code 27560	
	Purpose of Disbursement Refund of Individual Contribution	
	Candidate Name Blue Cross and Blue Shield of North Carolina Employee Political Action Committee	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	576.30
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. James Wilson

Transaction ID: SB28A.81703

Date of Disbursement

^M	^M	/	^D	^D	/	^Y	^Y	^Y	^Y
1	2		3	1		2	0	0	9

Mailing Address 227 Midenhall Way

Amount of Each Disbursement this Period

192.10

City Cary State NC Zip Code 27513

Purpose of Disbursement
Refund of Individual Contribution

--

Candidate Name
Blue Cross and Blue Shield of North Carolina Em-
ployee Political Action Committee

Category/
Type

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

192.10

TOTAL This Period (last page this line number only)

768.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Sen. Marc Basnight	Transaction ID: SB29.74588 Date of Disbursement
	Mailing Address PO Box 302	<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
	City Manteo State NC Zip Code 28403	Amount of Each Disbursement this Period
	Purpose of Disbursement contribution	<input type="text" value="4000.00"/>
	Candidate Name Sen. Marc Basnight	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) BCBSA BluePac	Transaction ID: SB29.74586 Date of Disbursement
	Mailing Address 1310 G. Street N.W. 12th Floor	<input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement contribution	<input type="text" value="4000.00"/>
	Candidate Name BCBSA BluePac	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Phil Berger	Transaction ID: SB29.75433 Date of Disbursement
	Mailing Address 1809 Indian Trail	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Eden State NC Zip Code 27288	Amount of Each Disbursement this Period
	Purpose of Disbursement contribution	<input type="text" value="2000.00"/>
	Candidate Name Phil Berger	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Sen. Linda Garrou <hr/> Mailing Address P.O. Box 11843 <hr/> City Winston-Salem State NC Zip Code 27116 <hr/> Purpose of Disbursement contribution Candidate Name Sen. Linda Garrou Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.75435 Date of Disbursement 11 / 30 / 2009	Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Hugh Holliman <hr/> Mailing Address 102 Warrior Way <hr/> City Lexington State NC Zip Code 27295 <hr/> Purpose of Disbursement contribution Candidate Name Hugh Holliman Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.75432 Date of Disbursement 11 / 30 / 2009	Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) Floyd McKissick <hr/> Mailing Address PO Box 51608 <hr/> City Durham State NC Zip Code 27717 <hr/> Purpose of Disbursement contribution Candidate Name Floyd McKissick Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District:	Transaction ID: SB29.75430 Date of Disbursement 11 / 18 / 2009	Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) NC Republican Senate Committee	Transaction ID: SB29.74591 Date of Disbursement																			
	Mailing Address 1506 Hillsborough Street	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	9	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	9	/	2	0	0	9												
	City Raleigh State NC Zip Code 27605	Amount of Each Disbursement this Period																			
	Purpose of Disbursement contribution	<table border="1"><tr><td>2000.00</td></tr></table>	2000.00																		
2000.00																					
	Candidate Name NC Republican Senate Committee	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Rep. Martin Nesbitt	Transaction ID: SB29.74592 Date of Disbursement																			
	Mailing Address 29 N. Market Street	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	2	/	2	0	0	9												
	City Asheville State NC Zip Code 28801	Amount of Each Disbursement this Period																			
	Purpose of Disbursement contribution	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00																		
2500.00																					
	Candidate Name Rep. Martin Nesbitt	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) Sen. Anthony Rand	Transaction ID: SB29.74589 Date of Disbursement																			
	Mailing Address 2014 Litho Place	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	4	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9	/	1	4	/	2	0	0	9												
	City Fayetteville State NC Zip Code 28304	Amount of Each Disbursement this Period																			
	Purpose of Disbursement contribution	<table border="1"><tr><td>4000.00</td></tr></table>	4000.00																		
4000.00																					
	Candidate Name Sen. Anthony Rand	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional) ►

8500.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jerry Tillman	Transaction ID: SB29.74590 Date of Disbursement 09 / 14 / 2009
	Mailing Address 6246 Weant Road	
	City Archdale State NC Zip Code 27263	Amount of Each Disbursement this Period 750.00
	Purpose of Disbursement contribution Candidate Name Jerry Tillman	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
B.	Full Name (Last, First, Middle Initial) Arthur Williams	Transaction ID: SB29.75436 Date of Disbursement 11 / 30 / 2009
	Mailing Address	
	City State Zip Code	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement contribution Candidate Name Arthur Williams	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
C.	Full Name (Last, First, Middle Initial) Doug Yongue	Transaction ID: SB29.75437 Date of Disbursement 11 / 30 / 2009
	Mailing Address 604 Prince St.	
	City Laurinburg State NC Zip Code 28352	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement contribution Candidate Name Doug Yongue	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District: 46	

SUBTOTAL of Disbursements This Page (optional)	1750.00
TOTAL This Period (last page this line number only)	23250.00