

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 Kansas, Inc. Employee PAC

ADDRESS (number and street) 1133 SW Topeka Blvd. CC:855 - B3 Topeka KS 66629 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00197202 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 01 01 2009 through 06 30 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 Ann M. Shelton

Signature of Treasurer Electronically Filed by Ann M. Shelton Date 07 09 2009

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 7 columns and 1 row for Office Use Only

FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Blue Cross and Blue Shield of Kansas, Inc. Employee PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

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		8067.45
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	8067.45									
(c) Total Receipts (from Line 19) .....	4374.37	4374.37								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	12441.82	12441.82								
7. Total Disbursements (from Line 31) .....	4104.00	4104.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	8337.82	8337.82								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Blue Cross and Blue Shield of Kansas, Inc. Employee PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

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) .....	1310.00	1310.00
(ii) Unitemized .....	3058.25	3058.25
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	4368.25	4368.25
(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) .....	4368.25	4368.25
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.) .....	6.12	6.12
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)) .....	4374.37	4374.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	4374.37	4374.37

## DETAILED SUMMARY PAGE

of Disbursements

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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.....	4104.00	4104.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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 .....	0.00	0.00
(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)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
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))..	4104.00	4104.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4104.00	4104.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	4368.25	4368.25
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4368.25	4368.25
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: (check only one)	PAGE 6 / 9
	<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 Kansas, Inc. Employee PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael D. Atwood		Date of Receipt
	Mailing Address 5401 SW 40th Terr		<input type="text" value="02"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Topeka	KS	66610-2402
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4543
Name of Employer BCBSKS		Occupation Chief Medical Officer	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 ▼ 500.00	<input type="text" value="500.00"/>
			contribution by personal check

<b>B.</b>	Full Name (Last, First, Middle Initial) Andrew Corbin		Date of Receipt
	Mailing Address 6337 SW Hodges Road		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Auburn	KS	66402
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4523
Name of Employer BCBSKS		Occupation VP, Ext. Sales & Provider Relations	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 ▼ 260.00	<input type="text" value="260.00"/>
			\$20 per thirteen pay periods

<b>C.</b>	Full Name (Last, First, Middle Initial) Beryl Lowery-Born		Date of Receipt
	Mailing Address 1172 College		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Topeka	KS	66604
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4526
Name of Employer BCBSKS		Occupation Vice President, Finance	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 ▼ 290.00	<input type="text" value="290.00"/>
			\$25 per thirteen pay periods

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1050.00"/>
<b>TOTAL</b> 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 7 / 9	
	(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"/> 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 Kansas, Inc. Employee PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) William J Wallace		Date of Receipt		
	Mailing Address 2400 NW 44th		M M / D D / Y Y Y Y 06 / 30 / 2009		
	City Topeka	State KS	Zip Code 66618	<b>Transaction ID:</b> SA11AI.4530	
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 260.00		
	Name of Employer BCBSKS	Occupation VP, Information Services		\$20 per thirteen pay periods	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	260.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1310.00

**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)

<input type="checkbox"/> 21b	<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of Kansas, Inc. Employee PAC

<b>A.</b> Full Name (Last, First, Middle Initial) BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC <hr/> Mailing Address 1310 G STREET NW <hr/> City WASHINGTON State DC Zip Code 20005 <hr/> Purpose of Disbursement monthly contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22.4535 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 684.00
<b>B.</b> Full Name (Last, First, Middle Initial) BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC <hr/> Mailing Address 1310 G STREET NW <hr/> City WASHINGTON State DC Zip Code 20005 <hr/> Purpose of Disbursement monthly contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22.4536 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 684.00
<b>C.</b> Full Name (Last, First, Middle Initial) BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC <hr/> Mailing Address 1310 G STREET NW <hr/> City WASHINGTON State DC Zip Code 20005 <hr/> Purpose of Disbursement monthly contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22.4537 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 684.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2052.00
<b>TOTAL</b> 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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of Kansas, Inc. Employee PAC

A.	Full Name (Last, First, Middle Initial) BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC	Transaction ID: SB22.4538 Date of Disbursement 04 / 14 / 2009
	Mailing Address 1310 G STREET NW	Amount of Each Disbursement this Period 684.00
	City WASHINGTON State DC Zip Code 20005	
	Purpose of Disbursement monthly contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC	Transaction ID: SB22.4539 Date of Disbursement 05 / 11 / 2009
	Mailing Address 1310 G STREET NW	Amount of Each Disbursement this Period 684.00
	City WASHINGTON State DC Zip Code 20005	
	Purpose of Disbursement monthly contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC	Transaction ID: SB22.4540 Date of Disbursement 06 / 09 / 2009
	Mailing Address 1310 G STREET NW	Amount of Each Disbursement this Period 684.00
	City WASHINGTON State DC Zip Code 20005	
	Purpose of Disbursement monthly contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2052.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>4104.00</b>