

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text" value="168867.36"/>	<input type="text" value="168867.36"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="191924.59"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="39730.69"/>	<input type="text" value="87287.92"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="231655.28"/>	<input type="text" value="256155.28"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="130500.00"/>	<input type="text" value="155000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="101155.28"/>	<input type="text" value="101155.28"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

Write or Type Committee Name

BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 04 / 01 / 2018 To: 06 / 30 / 2018

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).....	33340.53	51189.90
(ii) Unitemized	6390.16	36098.02
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	39730.69	87287.92
(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)	39730.69	87287.92
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 Transfers (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)).....▶	39730.69	87287.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	39730.69	87287.92

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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.....	130500.00	155000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	130500.00	155000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	130500.00	155000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

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)	39730.69	87287.92
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	39730.69	87287.92
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 OF 81
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Acosta, Fernando, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx8148
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20075
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Aram, Cyrus, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8445
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20079
 Amount of Each Receipt this Period
 75.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Ayoubpour, Siamak, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx0962
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20081
 Amount of Each Receipt this Period
 75.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	300.00
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 7 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Bailet, Jeffrey, , ,		Date of Receipt MM / DD / YYYY 06 / 30 / 2018 Transaction ID : SA11AI.20082
Mailing Address Employee # xx4353 50 Beale Street		Amount of Each Receipt this Period 600.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$100.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) EVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Baker, Terri, J., ,		Date of Receipt MM / DD / YYYY 06 / 30 / 2018 Transaction ID : SA11AI.20084
Mailing Address emp xx1950, 50 Beale Street		Amount of Each Receipt this Period 162.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$27.00
Name of Employer (for Individual) Blue Shield of California	Occupation (for Individual) Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Baki, Claire, , ,		Date of Receipt MM / DD / YYYY 06 / 30 / 2018 Transaction ID : SA11AI.20085
Mailing Address Employee # xx2953 50 Beale Street		Amount of Each Receipt this Period 108.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$18.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Sr. Mgr.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 234.00	

SUBTOTAL of Receipts This Page (optional).....	870.00
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 8 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Balakai, Evgenia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx8318
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20086
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Baldi, Phillip, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx6202
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20087
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Balousek, Bret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx5527
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20088
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	450.00
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 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Barnes, Tracy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx2076
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20090
 Amount of Each Receipt this Period 300.00
 Memo Item
 Payroll contribution per cycle \$50.00

B. Bassett, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx2676
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20092
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Battin, David, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx4657
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20093
 Amount of Each Receipt this Period 120.00
 Memo Item
 Payroll contribution per cycle \$20.00

SUBTOTAL of Receipts This Page (optional).....	570.00
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 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Baumgardner, Sharon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx8428
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20094
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Bergman, Patrice, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx6395
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20096
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Bergstrom, Melinda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx2057
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20097
 Amount of Each Receipt this Period
 120.00
 Memo Item
 Payroll contribution per cycle \$20.00

SUBTOTAL of Receipts This Page (optional).....	378.00
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 11 OF 81
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Beuoy, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# 5248
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20098
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Blakeman, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee#xx1919
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20099
 Amount of Each Receipt this Period
 180.00
 Memo Item
 Payroll contribution per cycle \$30.00

C. Blanton, Quentin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx2320
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20100
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	438.00
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 12 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Bleau, Jason, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1927
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20101
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Braza, Carlo, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx1673
 50 Beale street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Senior Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20107
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Brits, Ruta, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx2060
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20108
 Amount of Each Receipt this Period 120.00
 Memo Item
 Payroll contribution per cycle \$20.00

SUBTOTAL of Receipts This Page (optional).....	336.00
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 13 OF 81
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Brooks, Nicole, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx7380
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20109
 Amount of Each Receipt this Period 180.00
 Memo Item
 Payroll contribution per cycle \$30.00

B. Brown, Carlos, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3048
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20110
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Brown, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp #xx0647
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20111
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	438.00
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 14 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Brown, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx9004, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 411.32

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20112
 Amount of Each Receipt this Period 189.84
 Memo Item
 Payroll contribution per cycle \$31.64

B. Buchert, Greg, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx4682 50 Beale Street
 City San Francisco State CA Zip Code 94030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) President - Care1st
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1365.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20113
 Amount of Each Receipt this Period 630.00
 Memo Item
 Payroll contribution per cycle \$105.00

C. Canter, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx3954 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20115
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....▶	927.84
TOTAL This Period (last page this line 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 15 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Casey, Rebecca, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx5060
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20116
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Cates, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8886
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20119
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Cemo, Summer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3503
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 429.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20120
 Amount of Each Receipt this Period 198.00
 Memo Item
 Payroll contribution per cycle \$33.00

SUBTOTAL of Receipts This Page (optional).....	456.00
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 16 OF 81
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Cerf, Kristen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx3590
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Assoc General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20121
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Chang, Doris, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx8233
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20124
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Chasin, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx8020
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1950.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20125
 Amount of Each Receipt this Period
 900.00
 Memo Item
 Payroll contribution per cycle \$150.00

SUBTOTAL of Receipts This Page (optional).....	1200.00
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 17 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Chayt, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3401
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Assoc. General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20126
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Cohen, Gary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx4352
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20131
 Amount of Each Receipt this Period
 360.00
 Memo Item
 Payroll contribution per cycle \$60.00

C. Comporato, Andrea, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx4824
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20132
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	618.00
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 18 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Connell, Kristen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx4359
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20133
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Crea, Kimberly A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx5254
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20135
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Dahlem, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx1109
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20136
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	408.00
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 19 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Dailey, Carla M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx0442
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20137
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Dansky, Tanya, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx4732
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) CMO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20138
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Datcher, Shannon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx7287
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20141
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	450.00
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 20 OF 81
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Davis Majewski, Becky, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee # xx4605
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20142

Amount of Each Receipt this Period
 150.00

Memo Item
 Payroll contribution per cycle \$25.00

B. Dehart, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee# xx0621
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Consultant Lead

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 234.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20144

Amount of Each Receipt this Period
 108.00

Memo Item
 Payroll contribution per cycle \$18.00

C. Dekeyzer, Marilyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee # xx4798
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20145

Amount of Each Receipt this Period
 150.00

Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 408.00

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 21 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Devine, Renee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx0495
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20146
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Dharmar, Rajkumar, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8261
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20147
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Dixit, Anshul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx5104
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20149
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	408.00
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 22 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Drahmann, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx7100
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20151
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Dutra, Cynthia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3097
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20152
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Ebrahimi, Angela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx7994
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Mgr.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20153
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	366.00
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 23 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Edwards, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3066
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20154
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Ejuwa, Jacqueline, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx3113
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20156
 Amount of Each Receipt this Period
 270.00
 Memo Item
 Payroll contribution per cycle \$45.00

C. Elliott, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx5549
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20157
 Amount of Each Receipt this Period
 270.00
 Memo Item
 Payroll contribution per cycle \$45.00

SUBTOTAL of Receipts This Page (optional).....▶	648.00
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 24 OF 81
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Ellis, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx2404
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20158
 Amount of Each Receipt this Period 120.00
 Memo Item
 Payroll contribution per cycle \$20.00

B. Ferguson, Kathryn, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx2319
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20159
 Amount of Each Receipt this Period 120.00
 Memo Item
 Payroll contribution per cycle \$20.00

C. Ferguson, Wendell, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx8274
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20160
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 390.00
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 25 OF 81
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Fisher, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1784
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20161
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Flaum, Amanda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx1242
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20162
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Florez, Hugo, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1071
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20164
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	366.00
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 26 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Forte, Amber, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx4218
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20165
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Fortino, Dawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8687
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20166
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Fortune, Michele, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx4636
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20167
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	408.00
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 27 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Foy, Sandra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx0928
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20168
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Frye, Erika, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx8832
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20169
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Furtado, Miguel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx1053
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20170
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	324.00
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 28 OF 81
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Gannon, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx2952
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 234.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20172
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Garibaldi, Valerie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx4871
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 234.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20173
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Gebhart, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx7244
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 390.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20176
 Amount of Each Receipt this Period
 180.00
 Memo Item
 Payroll contribution per cycle \$30.00

SUBTOTAL of Receipts This Page (optional).....	396.00
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 29 OF 81
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Gensch, Devin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx4081
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 364.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20177
 Amount of Each Receipt this Period 168.00
 Memo Item
 Payroll contribution per cycle \$28.00

B. Gibson Pace, Diana, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx0252
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20178
 Amount of Each Receipt this Period 210.00
 Memo Item
 Payroll contribution per cycle \$35.00

C. Gilliland, Terry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx5469
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20179
 Amount of Each Receipt this Period 350.00
 Memo Item
 Payroll contribution per cycle \$70.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 728.00
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 30 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Gillis, Heather, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3333
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20181
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Goldberg, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx4504
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20182
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Gonzales, Celia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx5859
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20183
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	366.00
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 OF 81
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Goode, Kimberley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx4855
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20184
 Amount of Each Receipt this Period
 420.00
 Memo Item
 Payroll contribution per cycle \$70.00

B. Gregg, Christy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx2233
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20186
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Grivett, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx3781
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20187
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	678.00
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 32 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Guerridos, Raul E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx2698
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20189
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Gustavson, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx5452
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20191
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Harris, Myrta, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx3364
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20194
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	366.00
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 33 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Harris, Staci, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8450
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 299.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20195
 Amount of Each Receipt this Period
 138.00
 Memo Item
 Payroll contribution per cycle \$23.00

B. Hendrickson, Ruth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx 3054
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 585.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20196
 Amount of Each Receipt this Period
 270.00
 Memo Item
 Payroll contribution per cycle \$45.00

C. Hermsillo, Sarah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx 7363
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20197
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	558.00
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 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Hilty, Larry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx9314
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20199
 Amount of Each Receipt this Period 210.00
 Memo Item
 Payroll contribution per cycle \$35.00

B. Hornbacher, Stanford, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx6615
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of Callifornia Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 292.50

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20203
 Amount of Each Receipt this Period 135.00
 Memo Item
 Payroll contribution per cycle \$22.50

C. Huber, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx7445
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Sr. Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20204
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	453.00
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 35 OF 81
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Hurd, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx6366
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20205
 Amount of Each Receipt this Period 180.00
 Memo Item
 Payroll contribution per cycle \$30.00

B. Iwasaki, Jeff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3419
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20208
 Amount of Each Receipt this Period 270.00
 Memo Item
 Payroll contribution per cycle \$45.00

C. Jacobs, Seth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx6574
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Sr. VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20209
 Amount of Each Receipt this Period 450.00
 Memo Item
 Payroll contribution per cycle \$75.00

SUBTOTAL of Receipts This Page (optional).....	900.00
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 36 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Jmath, Pooja, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20211
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Johns, Lorie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx5447 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 292.50

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20212
 Amount of Each Receipt this Period 135.00
 Memo Item
 Payroll contribution per cycle \$22.50

C. Ju, Sugene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx 4170 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Lead
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20214
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	393.00
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 37 OF 81
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Kalyan, Krishna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3135
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20216
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Karrobi, Syng, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx4555
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20217
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Kaur, Aabneet, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx1488
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20219
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	408.00
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 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Khemani, Pradip, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx7222
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20222
 Amount of Each Receipt this Period
 210.00
 Memo Item
 Payroll contribution per cycle \$35.00

B. Kibler, Tina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx5267
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 871.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20223
 Amount of Each Receipt this Period
 402.00
 Memo Item
 Payroll contribution per cycle \$67.00

C. Kiefer, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx8277
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 845.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20224
 Amount of Each Receipt this Period
 390.00
 Memo Item
 Payroll contribution per cycle \$65.00

SUBTOTAL of Receipts This Page (optional).....	1002.00
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 39 OF 81
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Kiley, James, , ,		Date of Receipt MM / DD / YYYY 06 / 30 / 2018 Transaction ID : SA11AI.20225
Mailing Address Employee# xx8889 50 Beale Street		Amount of Each Receipt this Period 150.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$25.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kim, Keith, , ,		Date of Receipt MM / DD / YYYY 06 / 30 / 2018 Transaction ID : SA11AI.20226
Mailing Address Employee #xx5487 50 Beale St.,		Amount of Each Receipt this Period 210.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$35.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 455.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Kim, Yunkyung, , ,		Date of Receipt MM / DD / YYYY 06 / 30 / 2018 Transaction ID : SA11AI.20228
Mailing Address Employee # xx5065 50 Beale Street		Amount of Each Receipt this Period 240.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$40.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Sr. 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).....	600.00
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 40 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Knudsen, Amanda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3382
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Assoc. General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20231
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Langum, Rebecca, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx2976
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20233
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Lautsch, Kenneth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx 5111
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20234
 Amount of Each Receipt this Period
 180.00
 Memo Item
 Payroll contribution per cycle \$30.00

SUBTOTAL of Receipts This Page (optional).....	396.00
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 41 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Leland, Maureen, , ,			Date of Receipt MM / DD / YYYY 06 / 30 / 2018 Transaction ID : SA11AI.20238		
Mailing Address Employee # xx 2874 50 Beale Street			Amount of Each Receipt this Period 108.00		
City San Francisco	State CA	Zip Code 94105	<input type="checkbox"/> Memo Item Payroll contribution per cycle \$18.00		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Blue Shield of CA		Occupation (for Individual) Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 234.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Leone, Maria, , ,			Date of Receipt MM / DD / YYYY 06 / 30 / 2018 Transaction ID : SA11AI.20239		
Mailing Address Employee# xx0260 50 Beale Street			Amount of Each Receipt this Period 138.00		
City San Francisco	State CA	Zip Code 94105	<input type="checkbox"/> Memo Item Payroll contribution per cycle \$23.00		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Blue Shield of CA		Occupation (for Individual) Sr. Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 299.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Loving III, Alvin, , ,			Date of Receipt MM / DD / YYYY 06 / 30 / 2018 Transaction ID : SA11AI.20241		
Mailing Address Employee #xx7643 50 Beale Street			Amount of Each Receipt this Period 150.00		
City San Francisco	State CA	Zip Code 94105	<input type="checkbox"/> Memo Item Payroll contribution per cycle \$25.00		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Blue Shield of CA		Occupation (for Individual) VP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 325.00			

SUBTOTAL of Receipts This Page (optional).....	396.00
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 42 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Lowe, Pamela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx4473
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20242
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Luippold, Analisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx6832
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20244
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Lum, Alison, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8386
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20245
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	408.00
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 43 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Lynaugh, Kathleen, , ,		Date of Receipt
Mailing Address emp xx9411 50 Beale Street		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2018"/>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.20246
Name of Employer (for Individual) Blue Shield of California		Amount of Each Receipt this Period <input type="text" value="240.00"/>
Occupation (for Individual) Director		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="520.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lyster, Deborah, , ,		Date of Receipt
Mailing Address Employee# xx0804 50 Beale Street		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2018"/>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.20247
Name of Employer (for Individual) Blue Shield of CA		Amount of Each Receipt this Period <input type="text" value="108.00"/>
Occupation (for Individual) Sr. Manager		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$18.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="234.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Maguire, Steven, , ,		Date of Receipt
Mailing Address Employee # xx 4175 50 Beale Street		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2018"/>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.20248
Name of Employer (for Individual) Blue Shield of CA		Amount of Each Receipt this Period <input type="text" value="108.00"/>
Occupation (for Individual) Manager		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$18.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="234.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="456.00"/>
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 44 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Marcoccia, Sibylle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx5264
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20249
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Markovich, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx6510
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20250
 Amount of Each Receipt this Period 600.00
 Memo Item
 Payroll contribution per cycle \$100.00

C. Marshall, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8149
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20251
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	816.00
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 45 OF 81
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Matsuda, Russell, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx0289
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20252
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Mayer, Antoinette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx1496
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20253
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Mayhew, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx 5058
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20254
 Amount of Each Receipt this Period
 270.00
 Memo Item
 Payroll contribution per cycle \$45.00

SUBTOTAL of Receipts This Page (optional).....	528.00
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 46 OF 81
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. McGrain, Blair, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx 4358
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Head
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20256
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Minarcin, Andrea, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 Beale Street
 employee #xx4753
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20259
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Mixon, Haley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx3986
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20260
 Amount of Each Receipt this Period
 180.00
 Memo Item
 Payroll contribution per cycle \$30.00

SUBTOTAL of Receipts This Page (optional).....	480.00
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 47 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Monterola, Rufino, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx2942
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20261
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Moynihan, Desmond, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx1804
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20264
 Amount of Each Receipt this Period 120.00
 Memo Item
 Payroll contribution per cycle \$20.00

C. Mullany, Kristin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx8111
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Chief of Staff
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20265
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	378.00
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 48 OF 81
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Murphy, Jon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx2151
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.06

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20266
 Amount of Each Receipt this Period 147.72
 Memo Item
 Payroll contribution per cycle \$24.62

B. Murray, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1032
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20269
 Amount of Each Receipt this Period 360.00
 Memo Item
 Payroll contribution per cycle \$60.00

C. Nguyen, Kim, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx 5068
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20271
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	615.72
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: (check only one)	PAGE 49 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Nye, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3144
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 845.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20273
 Amount of Each Receipt this Period 390.00
 Memo Item
 Payroll contribution per cycle \$65.00

B. O'Hara, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx0977
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20277
 Amount of Each Receipt this Period 420.00
 Memo Item
 Payroll contribution per cycle \$70.00

C. O'Neill, Timothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8459
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20278
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	960.00
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 50 OF 81
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Ocepek, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1761
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20274
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Odette, Terese, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx7096
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20275
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Osorio, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx 5790
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Director
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20281
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	450.00
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 51 OF 81
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Palko, Peter, , ,		Date of Receipt MM / DD / YYYY 06 / 30 / 2018 Transaction ID : SA11AI.20284
Mailing Address Employee #xx0467 50 Beale Street		Amount of Each Receipt this Period 150.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$25.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Sr. Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Panek, William, , ,		Date of Receipt MM / DD / YYYY 06 / 30 / 2018 Transaction ID : SA11AI.20285
Mailing Address emp xx8535 50 Beale Street		Amount of Each Receipt this Period 150.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$25.00
Name of Employer (for Individual) Blue Shield of California	Occupation (for Individual) Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Papouchian-Kulinski, Armine, , ,		Date of Receipt MM / DD / YYYY 06 / 30 / 2018 Transaction ID : SA11AI.20286
Mailing Address Employee #xx5680 50 Beale St.,		Amount of Each Receipt this Period 240.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$40.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) 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).....	540.00
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 52 OF 81
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Paredes, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1203
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 299.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20287
 Amount of Each Receipt this Period 138.00
 Memo Item
 Payroll contribution per cycle \$23.00

B. Patel, Amul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx5255
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20289
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Ramey, Alison, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx2396
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20293
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	438.00
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 53 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Raongthum, Anchulee J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx6257
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20294
 Amount of Each Receipt this Period
 120.00
 Memo Item
 Payroll contribution per cycle \$20.00

B. Rau, Carsten, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3095
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20296
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Reeder, Marcella, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx2415
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Consultant
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 234.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20297
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	378.00
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 55 OF 81
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Safran, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx9164, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20304
 Amount of Each Receipt this Period 120.00
 Memo Item
 Payroll contribution per cycle \$20.00

B. Salow, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 Beale Street employee # xx5516
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20306
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Saporta Cheng, Carla, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx 5163 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Government Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 299.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20307
 Amount of Each Receipt this Period 138.00
 Memo Item
 Payroll contribution per cycle \$23.00

SUBTOTAL of Receipts This Page (optional).....	408.00
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 56 OF 81
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Schulz, Shayna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3526
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20310
 Amount of Each Receipt this Period 270.00
 Memo Item
 Payroll contribution per cycle \$45.00

B. Scott, Hope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx0637
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20311
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Sharpsteen, Trudi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx4271
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20314
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	528.00
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 57 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Shearer, Steve, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx 4822
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 585.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20316
 Amount of Each Receipt this Period
 270.00
 Memo Item
 Payroll contribution per cycle \$45.00

B. Shen, Danny, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx2954
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20318
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Shih, Michelle, Y, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx6919
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20320
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	570.00
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 58 OF 81
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Smith, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx7922
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20322
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Solomon, Gilbert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx1700
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 553.80

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20323
 Amount of Each Receipt this Period 230.75
 Memo Item
 Payroll contribution per cycle \$46.15

C. Sommercamp, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3636
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20324
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	530.75
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: (check only one)	PAGE 59 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Spector, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx4420, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1028.56

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20325
 Amount of Each Receipt this Period 474.72
 Memo Item
 Payroll contribution per cycle \$79.12

B. Stuart, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx2061 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20332
 Amount of Each Receipt this Period 270.00
 Memo Item
 Payroll contribution per cycle \$45.00

C. Su, Felix, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx3601 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20333
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	852.72
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: (check only one)	PAGE 60 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Summer, Sarah, , ,		Date of Receipt
Mailing Address emp xx1535 50 Beale street		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2018"/>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.20335
Name of Employer (for Individual) Blue Shield of California		Occupation (for Individual) Sr. Counsel
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="559.00"/>	Amount of Each Receipt this Period <input type="text" value="258.00"/>
		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$43.00

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Sun, Cecilia, , ,		Date of Receipt
Mailing Address Employee # xx3131 50 Beale Street		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2018"/>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.20336
Name of Employer (for Individual) Blue Shield of CA		Occupation (for Individual) VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="780.00"/>	Amount of Each Receipt this Period <input type="text" value="360.00"/>
		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$60.00

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Tandon, Vikas, , ,		Date of Receipt
Mailing Address Employee# xx4678 50 Beale Street		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2018"/>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.20337
Name of Employer (for Individual) Blue Shield of CA		Occupation (for Individual) Sr. Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="205.00"/>	Amount of Each Receipt this Period <input type="text" value="82.50"/>
		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$17.50

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="700.50"/>
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 61 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Taylor, Jayne W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx5713
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20339
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Tolentino Lorenzo, Janice, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx4413
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20342
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Ullom, Regina A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx5624
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20345
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	366.00
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 62 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Valencia, Devon M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx2459
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 585.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20347
 Amount of Each Receipt this Period
 270.00
 Memo Item
 Payroll contribution per cycle \$45.00

B. Van Eckert, Ingrid, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx6393
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 234.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20349
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Van Goor, Anthony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3046
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20350
 Amount of Each Receipt this Period
 125.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	503.00
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 63 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Villafuerte, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx5007
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20351
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Walthall, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx2537
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20356
 Amount of Each Receipt this Period 420.00
 Memo Item
 Payroll contribution per cycle \$70.00

C. Wells, Darrin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8661
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20358
 Amount of Each Receipt this Period 270.00
 Memo Item
 Payroll contribution per cycle \$45.00

SUBTOTAL of Receipts This Page (optional).....	798.00
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 64 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Westbrook, Zachary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx4151
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Program leader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20359
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Whitelaw, Jayne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx5978
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20360
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Whitney, Na'Keithia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx 7731
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20361
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	408.00
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 65 OF 81
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Williams, Bryce, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8031
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 585.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20363
 Amount of Each Receipt this Period
 270.00
 Memo Item
 Payroll contribution per cycle \$45.00

B. Wilson, Lila, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1064
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Employee
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20364
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Winter, Wendy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx2464
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 234.00

Date of Receipt
 06 / 30 / 2018
Transaction ID : SA11AI.20365
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	528.00
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 66 OF 81
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Wong, Salina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx3056
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20368
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Worbets, Jason, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx1921
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20371
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Wylie, Sarah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx 2362
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20372
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 408.00
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 67 OF 81
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Yan, Lily, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx 5658
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20373
 Amount of Each Receipt this Period
 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Yang, Winnie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx7578
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20374
 Amount of Each Receipt this Period
 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Yao, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 Beale Street
 employee# xx5363
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2018
Transaction ID : SA11AI.20375
 Amount of Each Receipt this Period
 210.00
 Memo Item
 Payroll contribution per cycle \$35.00

SUBTOTAL of Receipts This Page (optional).....	468.00
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 68 OF 81
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Yi, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx2915
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20376
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Yokoyama, Krista, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8246
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Sr. Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20377
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Zimmerling, Marcus, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx5374
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2018
Transaction ID : SA11AI.20380
 Amount of Each Receipt this Period 108.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	366.00
TOTAL This Period (last page this line number only).....	33340.53

**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"/> 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ANNA ESHOO FOR CONGRESS

Mailing Address 555 Capitol Mall Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
2018 Primary

Candidate Name
ANNA ESHOO FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 14

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2018

FEC Identification Number

C C00258475

Transaction ID : SB23.20389

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. BARBARA LEE FOR CONGRESS

Mailing Address 333 HEGENBERGER RD, STE 369

City OAKLAND State CA Zip Code 94621

Purpose of Disbursement
2018 Primary

Candidate Name
BARBARA LEE FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 13

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2018

FEC Identification Number

C C00331769

Transaction ID : SB23.20397

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. BERA FOR CONGRESS

Mailing Address PO BOX 582496

City ELK GROVE State CA Zip Code 95758

Purpose of Disbursement
2018 Primary

Candidate Name
BERA FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 07

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2018

FEC Identification Number

C C00461061

Transaction ID : SB23.20403

Amount of Each Disbursement this Period

2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

10000.00

**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 type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. BLUEPAC - BCBSA PAC		Date of Disbursement MM / DD / YYYY 05 / 14 / 2018
Mailing Address 1310 G STREET NW		FEC Identification Number C00194746 Transaction ID : SB23.20388 Amount of Each Disbursement this Period 14500.00
City WASHINGTON	State DC	Zip Code 20005
Purpose of Disbursement 2018 Contribution		Category/ Type
Candidate Name BLUEPAC - BCBSA PAC		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. COMMITTEE TO RE-ELECT LINDA SANCHEZ		Date of Disbursement MM / DD / YYYY 05 / 24 / 2018
Mailing Address 410 1ST ST SE SUITE 310		FEC Identification Number C00384057 Transaction ID : SB23.20399 Amount of Each Disbursement this Period 2500.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement 2018 Primary		Category/ Type
Candidate Name COMMITTEE TO RE-ELECT LINDA SANCHEZ		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 38	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. COMMITTEE TO RE-ELECT LINDA SANCHEZ		Date of Disbursement MM / DD / YYYY 05 / 24 / 2018
Mailing Address 410 1ST ST SE SUITE 310		FEC Identification Number C00384057 Transaction ID : SB23.20401 Amount of Each Disbursement this Period 2500.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement 2018 General		Category/ Type
Candidate Name COMMITTEE TO RE-ELECT LINDA SANCHEZ		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 38	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional)..... ▶

19500.00

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 checked="" type="checkbox"/> 23	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. CORY GARDNER FOR SENATE		Date of Disbursement MM / DD / YYYY 06 / 05 / 2018
Mailing Address 9227 E LINCOLN AVE #200-234		FEC Identification Number C 000492454 Transaction ID : SB23.20420
City LONE TREE	State CO	Zip Code 80124
Purpose of Disbursement 2018 General		Amount of Each Disbursement this Period 2500.00
Candidate Name CORY GARDNER FOR SENATE		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CO	District: 00	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. DEMOCRATIC CONG. CAMPAIGN COMM.		Date of Disbursement MM / DD / YYYY 05 / 24 / 2018
Mailing Address 430 South Capitol Street SE 2nd Floor		FEC Identification Number C 00000935 Transaction ID : SB23.20411
City Washington	State DC	Zip Code 20003
Purpose of Disbursement 2018 Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name DEMOCRATIC CONG. CAMPAIGN COMM.		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: DC	District: 00	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. DEMOCRATIC SEN. CAMPAIGN COMMITTEE		Date of Disbursement MM / DD / YYYY 06 / 25 / 2018
Mailing Address 120 MARYLAND AVENUE NE		FEC Identification Number C 00042366 Transaction ID : SB23.20426
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement 2018 Contribution		Amount of Each Disbursement this Period 10000.00
Candidate Name DEMOCRATIC SEN. CAMPAIGN COMMITTEE		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: DC	District:	
<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional)..... ▶

17500.00

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 checked="" type="checkbox"/> 23	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. DENHAM FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 24 / 2018
Mailing Address 2150 RIVER PLAZA DR #150		FEC Identification Number C 000473272 Transaction ID : SB23.20408
City SACRAMENTO	State CA	Zip Code 95833
Purpose of Disbursement 2018 General		Amount of Each Disbursement this Period 5000.00
Candidate Name DENHAM FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA	District: 19	

Full Name (Last, First, Middle Initial) B. DOUG LAMALFA COMMITTEE		Date of Disbursement MM / DD / YYYY 05 / 24 / 2018
Mailing Address 2150 RIVER PLAZA DR., #150		FEC Identification Number C 000509422 Transaction ID : SB23.20409
City SACRAMENTO	State CA	Zip Code 95833
Purpose of Disbursement 2018 Primary		Amount of Each Disbursement this Period 5000.00
Candidate Name DOUG LAMALFA COMMITTEE		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: CA	District: 01	

Full Name (Last, First, Middle Initial) C. Dr. Raul Ruiz for Congress		Date of Disbursement MM / DD / YYYY 05 / 24 / 2018
Mailing Address PO Box 3433		FEC Identification Number C 000502575 Transaction ID : SB23.20400
City Palm Desert	State CA	Zip Code 92261
Purpose of Disbursement 2018 Primary		Amount of Each Disbursement this Period 2500.00
Candidate Name Dr. Raul Ruiz for Congress		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA	District: 36	

SUBTOTAL of Disbursements This Page (optional).....▶	12500.00
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 checked="" type="checkbox"/> 23	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. FIRST STATE PAC

Mailing Address P.O. BOX 3006

City WILMINGTON State DE Zip Code 19804

Purpose of Disbursement
Stop pay check 2601 due to lost check

Candidate Name
FIRST STATE PAC

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 25 / 2018

FEC Identification Number

C C00363648

Transaction ID : SB23.20427

Amount of Each Disbursement this Period

- 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. GARAMENDI FOR CONGRESS

Mailing Address 1050 17TH ST NW STE 590

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
2018 Primary

Candidate Name
GARAMENDI FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify)

State: CA District: 03

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2018

FEC Identification Number

C C00462697

Transaction ID : SB23.20392

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. GARAMENDI FOR CONGRESS

Mailing Address 1050 17TH ST NW STE 590

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
2018 General

Candidate Name
GARAMENDI FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CA District: 03

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2018

FEC Identification Number

C C00462697

Transaction ID : SB23.20395

Amount of Each Disbursement this Period

2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

2500.00

**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 type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. HEIDI VICTORY FUND		Date of Disbursement MM / DD / YYYY 04 / 12 / 2018
Mailing Address 918 PENNSYLVANIA AVE SE		FEC Identification Number C 00629253 Transaction ID : SB23.20381
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement 2018 Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name HEIDI VICTORY FUND		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. HEIDI VICTORY FUND		Date of Disbursement MM / DD / YYYY 05 / 03 / 2018
Mailing Address 918 PENNSYLVANIA AVE SE		FEC Identification Number C 00629253 Transaction ID : SB23.20385
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement 2018 Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name HEIDI VICTORY FUND		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. HEIDI VICTORY FUND		Date of Disbursement MM / DD / YYYY 05 / 24 / 2018
Mailing Address 918 PENNSYLVANIA AVE SE		FEC Identification Number C 00629253 Transaction ID : SB23.20406
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement 2018 Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name HEIDI VICTORY FUND		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)..... ▶

7500.00

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 checked="" type="checkbox"/> 23	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. HEIDI VICTORY FUND		Date of Disbursement MM / DD / YYYY 05 / 25 / 2018
Mailing Address 918 PENNSYLVANIA AVE SE		FEC Identification Number C00629253 Transaction ID : SB23.20386 Amount of Each Disbursement this Period - 2500.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Stop pay check 2624 due to lost check		Category/ Type
Candidate Name HEIDI VICTORY FUND		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. HEIDI VICTORY FUND		Date of Disbursement MM / DD / YYYY 05 / 25 / 2018
Mailing Address 918 PENNSYLVANIA AVE SE		FEC Identification Number C00629253 Transaction ID : SB23.20407 Amount of Each Disbursement this Period - 2500.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Stop pay check 2641 due to lost check		Category/ Type
Candidate Name HEIDI VICTORY FUND		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. HEIDI VICTORY FUND		Date of Disbursement MM / DD / YYYY 05 / 31 / 2018
Mailing Address 918 PENNSYLVANIA AVE SE		FEC Identification Number C00629253 Transaction ID : SB23.20419 Amount of Each Disbursement this Period 2500.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement 2018 Contribution		Category/ Type
Candidate Name HEIDI VICTORY FUND		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)..... ▶

- 2500.00

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 checked="" type="checkbox"/> 23	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. JACKIE SPEIER FOR CONGRESS

Mailing Address PO BOX 112

City
BURLINGAME

State
CA

Zip Code
94011

Purpose of Disbursement
2018 Primary

Candidate Name

JACKIE SPEIER FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CA District: 12

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	1	8

FEC Identification Number

C C00443705

Transaction ID : SB23.20390

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. JACKIE SPEIER FOR CONGRESS

Mailing Address PO BOX 112

City
BURLINGAME

State
CA

Zip Code
94011

Purpose of Disbursement
2018 General

Candidate Name

JACKIE SPEIER FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CA District: 12

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	1	8

FEC Identification Number

C C00443705

Transaction ID : SB23.20391

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. JIMMY PANETTA FOR CONGRESS

Mailing Address 60 EAST CARMEL VALLEY ROAD

City
CARMEL VALLEY

State
CA

Zip Code
93924

Purpose of Disbursement
2018 Primary

Candidate Name

JIMMY PANETTA FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CA District: 20

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	1	8

FEC Identification Number

C C00592154

Transaction ID : SB23.20405

Amount of Each Disbursement this Period

2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

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

7500.00

**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 type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. JUDY CHU FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 24 / 2018
Mailing Address 16633 VENTURA BLVD # 1008		FEC Identification Number C 000458125 Transaction ID : SB23.20404
City ENCINO	State CA	Zip Code 91436
Purpose of Disbursement 2018 Primary		Amount of Each Disbursement this Period 2500.00
Candidate Name JUDY CHU FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 27	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. KAREN BASS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 24 / 2018
Mailing Address 777 S. Figueroa Street Suite 4050		FEC Identification Number C 000476523 Transaction ID : SB23.20396
City Los Angeles	State CA	Zip Code 90017
Purpose of Disbursement 2018 Primary		Amount of Each Disbursement this Period 2500.00
Candidate Name KAREN BASS FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 33	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. KEYSTONE VICTORY FUND		Date of Disbursement MM / DD / YYYY 05 / 24 / 2018
Mailing Address PO BOX 58746		FEC Identification Number C 000545830 Transaction ID : SB23.20415
City PHILADELPHIA	State PA	Zip Code 19102
Purpose of Disbursement 2018 Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name KEYSTONE VICTORY FUND		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: PA	District: 00	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

7000.00

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 checked="" type="checkbox"/> 23	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. MIMI WALTERS VICTORY FUND		Date of Disbursement MM / DD / YYYY 05 / 24 / 2018
Mailing Address 9070 IRVINE CENTER DRIVE, #150		FEC Identification Number C 000564674 Transaction ID : SB23.20413 Amount of Each Disbursement this Period 5000.00
City IRVINE	State CA	Zip Code 92618
Purpose of Disbursement 2018 Contribution		Category/ Type
Candidate Name MIMI WALTERS VICTORY FUND		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. MIMI WALTERS VICTORY FUND		Date of Disbursement MM / DD / YYYY 06 / 14 / 2018
Mailing Address 9070 IRVINE CENTER DRIVE, #150		FEC Identification Number C 000564674 Transaction ID : SB23.20425 Amount of Each Disbursement this Period 5000.00
City IRVINE	State CA	Zip Code 92618
Purpose of Disbursement 2018 Contribution		Category/ Type
Candidate Name MIMI WALTERS VICTORY FUND		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. NANCY PELOSI FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 24 / 2018
Mailing Address 235 Montgomery Street Suite 610		FEC Identification Number C 000213512 Transaction ID : SB23.20412 Amount of Each Disbursement this Period 5000.00
City San Francisco	State CA	Zip Code 94104
Purpose of Disbursement 2018 General		Category/ Type
Candidate Name NANCY PELOSI FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 08	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional)..... ▶

15000.00

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 checked="" type="checkbox"/> 23	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. PAC TO THE FUTURE		Date of Disbursement MM / DD / YYYY 05 / 24 / 2018
Mailing Address PMB 3230 268 Bush Street		FEC Identification Number C00344234 Transaction ID : SB23.20410 Amount of Each Disbursement this Period 5000.00
City San Francisco	State CA	Zip Code 94104
Purpose of Disbursement 2018 Contribution		Category/ Type
Candidate Name PAC TO THE FUTURE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: CA	District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. PALLONE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 04 / 19 / 2018
Mailing Address PO BOX 3176		FEC Identification Number C00226928 Transaction ID : SB23.20382 Amount of Each Disbursement this Period 2500.00
City LONG BRANCH	State NJ	Zip Code 07740
Purpose of Disbursement 2018 Primary		Category/ Type
Candidate Name PALLONE FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 06	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. RICHARD E NEAL FOR CONGRESS COMMITTEE		Date of Disbursement MM / DD / YYYY 06 / 05 / 2018
Mailing Address 76 MAGNOLIA TERRACE		FEC Identification Number C00226522 Transaction ID : SB23.20422 Amount of Each Disbursement this Period 2500.00
City SPRINGFIELD	State MA	Zip Code 01108
Purpose of Disbursement 2018 General		Category/ Type
Candidate Name RICHARD E NEAL FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MA	District: 01	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

10000.00

**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 type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. SHORE PAC

Mailing Address P.O. BOX 3157

City LONG BRANCH State NJ Zip Code 07740

Purpose of Disbursement
2018 Contribution

Candidate Name
SHORE PAC

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2018

FEC Identification Number

C C00410308

Transaction ID : SB23.20383

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. VALADAO FOR CONGRESS

Mailing Address 504 VAN NESS

City FRESNO State CA Zip Code 93721

Purpose of Disbursement
2018 General

Candidate Name
VALADAO FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify)

State: CA District: 21

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2018

FEC Identification Number

C C00499392

Transaction ID : SB23.20418

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. VITORIA PAC

Mailing Address 5132 N PALM AVE #227

City FRESNO State CA Zip Code 93704

Purpose of Disbursement
2018 Contribution

Candidate Name
VITORIA PAC

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 29 / 2018

FEC Identification Number

C C00551838

Transaction ID : SB23.20416

Amount of Each Disbursement this Period

5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

11500.00

130500.00