

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Stone, Robin, , ,
Type or Print Name of Treasurer


NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

|  |  |  |  |  |  | Fffice <br> Use <br> Only |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |

FEC Form 3X (Rev. 05/2016)

## Write or Type Committee Name <br> Blue Cross Blue Shield of Alabama PAC



| COLUMN A | COLUMN B |
| :---: | :---: |
| This Period | Calendar Year-to-Date |

6. (a) Cash on Hand January 1,

| Y-Y |
| :---: |
| 2017 |

(b) Cash on Hand at

Beginning of Reporting Period............



(d) Subtotal (add Lines 6(b) and

6(c) for Column A and Lines
6(a) and 6(c) for Column B) $\qquad$

7. Total Disbursements (from Line 31) $\qquad$
$\square 0.00$
$\square 20000.00$
8. Cash on Hand at Close of Reporting Period
(subtract Line 7 from Line 6(d)) $\qquad$

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D) $\qquad$
0.00
10. Debts and Obligations Owed BY the Committee (Itemize all on
Schedule C and/or Schedule D) $\qquad$
0.00
$x$
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

Write or Type Committee Name
Blue Cross Blue Shield of Alabama PAC

11. Contributions (other than loans) From:
(a) Individuals/Persons Other Than Political Committees
(i) Itemized (use Schedule A)............

|  | 6123.57 |  |
| :---: | :---: | :---: |
|  |  | 452.84 |
|  |  |  |
|  |  | 6576.41 |
|  |  | 0.00 |


|  | , | 30371.23 |
| :---: | :---: | :---: |
|  | , | 4677.55 |
|  | , | 35048.78 |
|  | , | 0.00 |
|  |  | 0.00 |

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)
$\square \quad 6576.41$

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees. $\qquad$
17. Other Federal Receipts
(Dividends, Interest, etc.) $\qquad$
18. Transfers from Non-Federal and Levin Funds
(a) Non-Federal Account
(from Schedule H3)..........................
(b) Levin Funds (from Schedule H5) .........
(c) Total Transfers (add 18(a) and 18(b))..

|  | 0.00 |  |
| :---: | :---: | :---: |
|  | , | 0.00 |
|  | , | 0.00 |

19. Total Receipts (add Lines $11(\mathrm{~d})$,
$12,13,14,15,16,17$, and $18(\mathrm{c})) \ldots \ldots .$.
$\square \quad 35048.78$
20. Total Federal Receipts
(subtract Line 18(c) from Line 19) .........


FEC Form 3X (Rev. 05/2016)

## II. Disbursements

21. Operating Expenditures:
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)
(i) Federal Share $\qquad$ $\ldots$.
(ii) Non-Federal Share $\qquad$
(b) Other Federal Operating Expenditures $\qquad$
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))
22. Transfers to Affiliated/Other Party Committees.
23. Contributions to Federal Candidates/Committees and Other Political Committees.
24. Independent Expenditures (use Schedule E)
25. Coordinated Party Expenditures
(52 U.S.C. § 30116(d))
(use Schedule F). $\qquad$
26. Loan Repayments Made $\qquad$
27. Loans Made
28. Refunds of Contributions To:
(a) Individuals/Persons Other

Than Political Committees $\qquad$
(b) Political Party Committees $\qquad$
(c) Other Political Committees (such as PACs).
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) $\qquad$
$\qquad$
29. Other Disbursements (Including Non-Federal Donations) $\qquad$
0.00

COLUMN B Calendar Year-to-Date

| 0 | 0.00 |
| :---: | :---: |
| 0 | 0.00 |
| - 0 | 0.00 |
| - 0 | 0.00 |
| , 0 | 0.00 |
| 20000 | 0.00 |
| - 0.0 | 0.00 |
| - 0.0 | 0.00 |
| , | 0.00 |
|  | 0.00 |
| - 0 | 0.00 |
| , 0 | 0.00 |
| 00 | 0.00 |
| 0.0 | 0.00 |

0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))
(a) Allocated Federal Election Activity (from Schedule H6)
$\qquad$
(ii) "Levin" Share.
(b) Federal Election Activity Paid Entirely With Federal Funds $\qquad$
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))


31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..

32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31). $\qquad$
$\square$
20000.00

Page 5
FEC Form 3X (Rev. 05/2016)
III. Net Contributions/
33. Total Contributions (other than loans)
(from Line 11(d), page 3)
34. Total Contribution Refunds (from Line 28(d))
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ......... $\downarrow$
37. Offsets to Operating Expenditures (from Line 15, page 3) $\qquad$
38. Net Operating Expenditures (subtract Line 37 from Line 36) $\qquad$

COLUMN A
Total This Period

COLUMN B Calendar Year-to-Date



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

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

FOR LINE NUMBER: PAGE 6 OF 18 (check only one)


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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Velezis, Michael, J., ,

Mailing Address 450 Riverchase Parkway East

| Mailing Address 450 Riverchase Parkway East |  |  |
| :---: | :---: | :---: |
| City <br> Birmingham | State <br> AL | $\begin{gathered} \text { Zip Code } \\ 35244 \end{gathered}$ |
| FEC ID number of contributing federal political committee. |  |  |
| Name of Employer (for Individual) BCBS AL | Occupation (for Individual) VP Legal Services |  |
| Receipt For: Primary General Other (specify) | Aggrega | $\begin{aligned} & \text { r-to-Date } \boldsymbol{V} \\ & 1041.65 \end{aligned}$ |

Date of Receipt

| M 05 | D ${ }^{\text {D }}$ ( <br> 1 | Y- $Y$ r 2017 |
| :---: | :---: | :---: |

Transaction ID : PR125562729677
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Jarrett, Angela, D, ,

Mailing Address 2 North Jackson Street Suite 202

| $\overline{\text { City }}$ | State | Zip Code |
| :---: | :---: | :---: |
| Montgomery | AL | 36104 |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BLUPAC |  | ion (for Individual) ms \& Benefit Admin |
|  | Aggrega |  |

Date of Receipt


Transaction ID : PR130963529677
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Weaver, Darrel, Craig, ,

Mailing Address 450 Riverchase Parkway East

| City <br> Birmingham |
| :--- |
| FEC ID number of contributing <br> federal political committee. |
| State <br> AL |
| Name of Employer (for Individual) <br> BLUPAC |
| Receipt For: <br> $\square$ <br> Primary <br> Other (specify) |
| General |

Date of Receipt


Transaction ID : PR132319629677
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)............................................................... | $624.99$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | , |

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

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

FOR LINE NUMBER: $\quad$ PAGE 7 OF 18 (check only one)


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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Keown, Kipp, D, ,

Mailing Address 450 Riverchase Parkway East

| Mailing Address 450 Riverchase Parkway East |
| :--- |
| City   <br> Birmingham State <br> AL Zip Code <br> 35244 <br> FEC ID number of contributing <br> federal political committee. C  <br> Name of Employer (for Individual)   <br> BLUPAC   <br> Receipt For: <br> $\square$ Primary $\quad \square$ General <br> Other (specify) $\nabla$ Occupation (for Individual) <br> VP Marketing  |

Date of Receipt

| $\begin{gathered} \mathrm{M} \quad \mathrm{M} \\ 05 \end{gathered}$ | $\begin{gathered} D \quad D \\ 31 \end{gathered}$ | $2017$ |
| :---: | :---: | :---: |
|  |  |  |

Transaction ID : PR132319729677
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Orr, Robert, R, ,

Mailing Address 1905 Balfour Dr

| City <br> Birmingham | State <br> AL | Zip Code <br> $35216-2703$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> $\square$ <br> Primary $\quad \square$ General <br> Other (specify) $\nabla$Occupation (for Individual) <br> VP Customer Service |  |  |

Date of Receipt


Transaction ID : PR78822929677
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Vines, Timothy, , ,

Mailing Address 717 Savannah PI

| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35226-3262 \\ \hline \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) EVP and COO |  |
| Receipt For: Primary General Other (specify) | Aggrega | r-to-Date $1041.65$ |


| SUBTOTAL of Receipts This Page (optional)................................................................. | $624.99$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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

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

FOR LINE NUMBER: PAGE 8 OF 18 (check only one)


Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.
name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Bonner, Laura, H, ,

Mailing Address 226 Cambo Ter

| Mailing Address 226 Cambo Ter |  |
| :---: | :---: |
| City Birmingham | State Zip Code <br> AL $35226-1078$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Dept Mgr Enrollment Services |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date <br> 220.00 |

Date of Receipt

| $\begin{gathered} M \\ 05 \end{gathered}$ | $\begin{gathered} D \quad D \\ 31 \end{gathered}$ | $\begin{aligned} & Y-Y \\ & 2017 \end{aligned}$ |
| :---: | :---: | :---: |

Transaction ID : PR78825529677
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Briggs, Dick, Dowling, ,

Mailing Address 4327 Kennesaw Dr

| City <br> Birmingham | State <br> AL | Zip Code <br> $35213-3311$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama | Occupation (for Individual) <br> Chief Business Officer |  |
| Receipt For: <br> $\square$ <br> Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78825829677
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Carden, Noel, W,

Mailing Address 5783 Cypress Trce

| City <br> Birmingham |
| :--- |
| FEC ID number of contributing <br> federal political committee. |
| AL |
| Name of Employer (for Individual) <br> BCBS Alabama |
| Receipt For: <br> $\square$ Primary $\quad \square$ <br> Other (specify) |

## Date of Receipt



Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)................................................................. | $456.66$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | 5 - |

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

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

FOR LINE NUMBER: PAGE 9 OF 18 (check only one)


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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Carter, Tony, H,

Mailing Address 156 Stonegate Dr

| Mailing Address 156 Stonegate Dr |  |
| :---: | :---: |
| City <br> Birmingham | State Zip Code <br> AL $35242-7054$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) VP Consumer Insurance Sales |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ |

Date of Receipt

| $\begin{gathered} M \\ 05 \end{gathered}$ | $\begin{gathered} D \quad D \\ 31 \end{gathered}$ | $\begin{aligned} & Y-Y \\ & 2017 \end{aligned}$ |
| :---: | :---: | :---: |

Transaction ID : PR78826429677
Amount of Each Receipt this Period
$\square 208.33$

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Council, Rebekah, Elgin, ,

Mailing Address 919 38th St S

| $\overline{\text { City }}$ | State | Zip Code |
| :---: | :---: | :---: |
| Birmingham | AL | 35222-3602 |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) SVP \& Chief Marketing Officer |  |
|  | Aggrega | r-to-Date $1041,65$ |

Date of Receipt


Transaction ID: PR78826929677
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DeCroes, Charles, B, ,

Mailing Address 1392 Belmont Ln

| City Helena | State <br> AL | Zip Code 35080-4004 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | $\mathrm{C}$ |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) VP Technology Support |  |
|  | Aggreg | r-to-Date <br> 1041.65 |

Date of Receipt


Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................. | $624.99$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | 5 - |

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

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

FOR LINE NUMBER: PAGE 10 OF 18 (check only one)


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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Dunsmore, Joseph, Edward, ,

Mailing Address 4474 Heritage Park Dr

| City <br> Birmingham | State <br> AL | Zip Code <br> $35226-4171$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) | Occupation (for Individual) <br> VP Application Development |  |
| RCBS Alabama |  |  |
| Receipt For: |  |  |
| $\square$Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ | Aggregate Year-to-Date $\boldsymbol{V}$ |  |

Date of Receipt

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Edwards, Brian, D, ,

Mailing Address 107 Eagle Cove Dr

| City <br> Pelham | State <br> AL | Zip Code <br> $35124-2223$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For:  <br> $\square$ Primary <br> Other (specify) $\boldsymbol{V}$ <br>  General | Occupation (for Individual) <br> VP Controller |  |

Date of Receipt


Transaction ID : PR78827729677
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Herringdon, Sheila, P, ,

Mailing Address 304 fox valley highlands cr

| City <br> Maylene |
| :--- |
| FEC ID number of contributing <br> federal political committee. |
| State <br> AL |
| Name of Employer (for Individual) <br> BCBS Alabama |
| Receipt For: <br> $\square$ Primary $\quad \square$ General <br> Other (specify) |

Date of Receipt


Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $624.99$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | - |

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

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

FOR LINE NUMBER: PAGE 11 OF 18 (check only one)


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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Ingrum, Jeffrey, A, ,

Mailing Address 4008 Charring Cross Ln

| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35226-2092 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) SVP Health Care Networks |  |
| Receipt For: Primary General Other (specify) | Aggreg | r-to-Date <br> 1041.65 |

Date of Receipt

| 05 | 31 | $2017$ |
| :---: | :---: | :---: |

Transaction ID : PR78829229677
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Kellogg, Terry, D, ,

Mailing Address 1230 Glen View Rd

| City <br> Birmingham | $\begin{gathered} \hline \text { State } \\ \text { AL } \end{gathered}$ | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35222-4317 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) <br> President and CEO |  |
| $\begin{aligned} & \text { Receipt For: } \\ & \square \text { Primary } \square \text { General } \\ & \square \text { Other (specify) } \mathbf{v} \end{aligned}$ | Aggrega | r-to-Date <br> 1041.65 |

Date of Receipt


Transaction ID : PR78829629677
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. LeMier, Sherrie, D, ,

Mailing Address 2448 Lancaster Cir

| City Birmingham | State <br> AL | Zip Code 35242-4420 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | $\mathrm{C}$ |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) President \& COO HBS |  |
|  | Aggrega | r-to-Date $1041.65$ |

Date of Receipt


Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $624.99$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | - |

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

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

FOR LINE NUMBER: PAGE 12 OF 18 (check only one)


Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.
name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Mackin, Carol, D,

Mailing Address 809 Royal Ter

| Mailing Address 809 Royal Ter |  |
| :---: | :---: |
| City Birmingham | State Zip Code <br> AL $35242-7222$ |
| FEC ID number of contributing federal political committee. | $\mathrm{C}$ |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) VP Corp Comm/Community Rel |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ |

Date of Receipt

| $\begin{gathered} \mathrm{M} \quad \mathrm{M} \\ 05 \end{gathered}$ | $31$ | $\begin{gathered} y-Y \\ 2017 \end{gathered}$ |
| :---: | :---: | :---: |

Transaction ID : PR78830729677
Amount of Each Receipt this Period
$\square 208.33$

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. McIntyre, Douglas, E, ,

Mailing Address 3489 Birchwood Ln

| City <br> Birmingham | State <br> AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35243-4434 \\ \hline \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) VP Healthcare Network Contract |  |
|  | Aggrega | r-to-Date <br> 1041.65 |

Date of Receipt


Transaction ID : PR78830929677
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

| Full Name of Individual (Last, Firs <br> C. Moor, John, Matthew, , | al) or Ful | zation Name | Date of Receipt |
| :---: | :---: | :---: | :---: |
| Mailing Address 18 Montcrest Dr |  |  |  |
| City | State | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35213-3022 \end{array}$ |  |
| Birmingham | AL |  | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C |  | $208.33$ |
| Name of Employer (for Individual) BCBS Alabama |  | Occupation (for Individual) | Memo Item |
|  | Aggrega | r-to-Date <br> 1041.65 | P/R Deduction (\$0.00 Bi-Weekly) |
| SUBTOTAL of Receipts This Page (optional)......................................................................... |  |  | $\square \quad 624.99$ |
| TOTAL This Period (last page this li | y).... | , |  |

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

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

FOR LINE NUMBER: PAGE 13 OF 18 (check only one)


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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Morris, Joe, S, ,

Mailing Address 908 Lakeview Estates Dr

| City <br> Bessemer | State <br> AL | Zip Code <br> $35023-5810$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) |  |  |
| BCBS Alabama |  |  |
| Receipt For:  <br> Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ Occupation (for Individual) <br> Director Facilities Operations |  |  |

Date of Receipt

| $\begin{gathered} M \\ 05 \end{gathered}$ | $\begin{gathered} D \quad D \\ 31 \end{gathered}$ | $\begin{aligned} & Y-Y \\ & 2017 \end{aligned}$ |
| :---: | :---: | :---: |

Transaction ID : PR78831529677
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Morrissette, John, M, ,

Mailing Address 1515 Amherst Cir

| City <br> Birmingham | State <br> AL | Zip Code <br> $35216-1009$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) |  |  |
| BCBS Alabama |  |  |
| Receipt For: |  |  |
| $\square$Primary $\quad \square$ General <br> Other (specify) $\nabla$ | Occupation (for Individual) <br> Mgr Sales Sup/Nat'I Accts |  |

Date of Receipt


Transaction ID : PR78831629677
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mosko, Ashley, S, , |  |  | Date of Receipt |
| :---: | :---: | :---: | :---: |
| Mailing Address 503 Olmsted St |  |  |  |
| City | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35242-1825 \end{array}$ |  |
| Birmingham |  |  | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. |  |  | $208.33$ |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) th Management | Memo Item <br> P/R Deduction (\$0.00 Bi-Weekly) |
|  | Aggrega | r-to-Date $\boldsymbol{V}$  <br>   |  |
| SUBTOTAL of Receipts This Page (optional) |  |  | , , 295.85 |
| TOTAL This Period (last page this line number only)........................................................... |  |  |  |

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

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

FOR LINE NUMBER: PAGE 14 OF 18 (check only one)


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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

| Mailing Address 101 Creekwood Ln |  |  |
| :---: | :---: | :---: |
| City <br> Helena | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35080-3273 \end{array}$ |
| FEC ID number of contributing federal political committee. | $\mathrm{C}$ |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) Info Security/CISO |
| Receipt For: Primary General Other (specify) | Aggreg | r-to-Date $220.00$ |

Date of Receipt

| 05 | ${ }^{\text {D }} 31$ |  |
| :---: | :---: | :---: |

Transaction ID : PR78831929677
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Patterson, Michael, L, ,

Mailing Address 1809 Lucinda Robey PI

| City <br> Birmingham | State <br> AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35211-3872 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) SVP and Chief Legal Officer |  |
|  | Aggrega | r-to-Date 1041,65 |

Date of Receipt


Transaction ID: PR78832029677
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

## Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Platt, David, E, ,

Mailing Address 3700 Montevallo Rd S

| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35213-4208 \\ \hline \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) e Sales Manager |
| Receipt For: Primary General Other (specify) | Aggreg | r-to-Date $268.62$ |


| SUBTOTAL of Receipts This Page (optional)............................................................... | $297.17$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | , |

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

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

FOR LINE NUMBER: PAGE 15 OF 18 (check only one)


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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Saxon, Vickie, L, ,

Mailing Address 4127 Heatherhedge Ln

| City <br> Birmingham | State AL | $\begin{aligned} & \hline \text { Zip Code } \\ & 35226-2095 \end{aligned}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | on (for Individual) erprise Resources |
|  | Aggrega |  |

Date of Receipt

P/R Deduction (\$0.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Smith, Mary, C, ,

Mailing Address 5440 Magnolia Trce

| City <br> Birmingham | State <br> AL | Zip Code <br> $35244-4533$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78833229677
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Stone, Joseph, Robin, ,

Mailing Address 3755 Everest Dr

| City <br> Montgomery | State <br> AL | Zip Code <br> $36106-3336$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) |  |  |
| BCBS Alabama |  |  |
| Receipt For: <br> Primary <br> Other (specify) | Occupation (for Individual) <br> VP Governmental Affairs |  |

Date of Receipt


Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$120.00 Monthly)


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

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

FOR LINE NUMBER: PAGE 16 OF 18 (check only one)


Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.
nAME OF COMMItTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Vice, Cynthia, M, ,

Mailing Address 936 Beech Ln

| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35213-2024 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) SVP \& Chief Financial Officer |  |
|  | Aggrega |  |

Date of Receipt

| $\begin{gathered} M \\ 05 \end{gathered}$ | $\begin{gathered} D \quad D \\ 31 \end{gathered}$ | $\begin{aligned} & Y-Y \\ & 2017 \end{aligned}$ |
| :---: | :---: | :---: |

Transaction ID : PR78834329677
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Walden, Joseph, Clay,

Mailing Address 14 Signal Hill Rd

| City <br> Spanish Fort | State <br> AL | Zip Code <br> $36527-3138$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) |  |  |
| BCBS Alabama |  | Occupation (for Individual) <br> District Manager |
| Receipt For: <br> $\square$ <br> Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78834529677
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$21.31 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Ward, Brandon, S, ,

Mailing Address 109 Coshatt Trl

| City <br> Birmingham | State <br> AL | Zip Code <br> $35244-2439$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For:  <br> Primary <br> Other (specify) Occupation (for Individual) <br> VP Business Services |  |  |

## Date of Receipt



Transaction ID : PR78834629677
Amount of Each Receipt this Period
$\square, 208.33$

## Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)............................................................... | , 459.28 |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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

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

FOR LINE NUMBER: PAGE 17 OF 18 (check only one)


Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.
name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Warren, Susan, M, ,

Mailing Address 2021 Chandapine Cir

| City <br> Pelham | State <br> AL | Zip Code <br> $35124-1430$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama | Occupation (for Individual) <br> Receipt For: Mgr Corporate Strategy |  |
| Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ | Aggregate Year-to-Date $\mathbf{V}$ |  |

Date of Receipt

| $\begin{gathered} M \\ 05 \end{gathered}$ | $\begin{gathered} D \quad D \\ 31 \end{gathered}$ | $\begin{aligned} & Y-Y \\ & 2017 \end{aligned}$ |
| :---: | :---: | :---: |

Transaction ID : PR78834729677
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$18.92 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Watkins, James, M,

Mailing Address 1935 Red Oak Ln NE

| City <br> Arab | State AL | Zip Code <br> $35016-5360$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | tion (for Individual) Manager |
|  | Aggreg | ar-to-Date 209.55 |

Date of Receipt


Transaction ID : PR78834829677
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$19.05 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Whitehead, Ronald, B, , $\qquad$
Mailing Address 1009 Margaret St

| City <br> Leeds | State <br> AL | Zip Code 35094-2736 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | $\mathrm{C}$ |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) HBS CFO |  |
|  | Aggrega | -to-Date $240.57$ |

Date of Receipt


Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$21.87 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)................................................................ $\downarrow$ | $119.68$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)........................................................ |  |

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

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

FOR LINE NUMBER: PAGE 18 OF 18 (check only one)


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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

| Mailing Address 130 Hampton Drive |  |  |
| :---: | :---: | :---: |
| City Pelham | State <br> AL | $\begin{array}{\|c\|} \hline \text { Zip Code } \\ 35244 \end{array}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS AL | Occupation (for Individual) <br> SVP Business Operations |  |
| Receipt For: Primary General Other (specify) | Aggreg |  |

Date of Receipt


Transaction ID : PR94042829677
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name |  |  | Date of Receipt $\square$ <br> D D |
| :---: | :---: | :---: | :---: |
| Mailing Address |  |  |  |
| City | State | Zip Code |  |
|  |  |  | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. |  |  |  |
| Name of Employer (for Individual) |  | ion (for Individual) | $\square$ Memo Item |
| Receipt For:$\square$Primary $\quad \square$ General <br> $\square$ Other (specify) $\nabla$ | Aggrega $\square$ | r-to-Date |  |

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

## Mailing Address

| City | State | Zip Code |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) | Occupation (for Individual) |  |
| Receipt For: <br> Primary <br> Other (specify) |  |  |

## Date of Receipt



## Amount of Each Receipt this Period



| SUBTOTAL of Receipts This Page (optional)................................................................ | $208.33$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)...................................................... | , 6123.57 |

