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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	For Other Than An Autho	orized Committee	Office Use Only	
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
HEALTHY GOVERNMENT	COMMITTEE-THE POLITIC	CAL ACTION COMMITTEE	OF BLUE CROSS & BLUE SHIELD (OF
ADDRESS (number and street)	P.O. BOX 13466			
Check if different than previously reported. (ACC)	PHOENIX		AZ 85002	
2. FEC IDENTIFICATION N	UMBER ▼ CITY	^	STATE ▲ ZIP CODE ▲	
C C00215202	3. IS RE	THIS NEW (N) OR	AMENDED (A)	
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Compared to the point of t	Report Due On: Mar 2 Apr 2 (c) 12-Day PRE-Election Report for the: Q3)	20 (M2) May 20 (Ms) 20 (M3) Jun 20 (M6) 0 (M4) Jul 20 (M7) Primary (12P) Convention (12C)	(Non-Elec Year Only Sep 20 (M9) Dec 20 (Non-Elec Year Only	ction / y) (M12) ction / y) (YE)
July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)	POST-Election Report for the:	General (30G) on	Runoff (30R) Special in the State of	(30S)
5. Covering Period 0		through 09	M / D D / Y Y Y Y Y Y 30 2018	
I certify that I have examined the Type or Print Name of Treasure	Ragan, Ashley, , ,	ny knowledge and belief it is	true, correct and complete.	
Signature of Treasurer	an, Ashley, , ,	[Electronically Filed]	Date 10 / 15 / 2018	Y I Y
NOTE: Submission of false, error	neous, or incomplete information	may subject the person signing	this Report to the penalties of 52 U.S.C. §	§ 30109
Office Use			FEC FORM 3X Rev. 05/2016	

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD OF 80 09 2018 09 30 2018 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 36951.95 January 1. 2018 (b) Cash on Hand at 29861.95 Beginning of Reporting Period..... 3508.00 23118.00 Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 60069.95 33369.95 6(a) and 6(c) for Column B)..... 4300.00 31000.00 7. Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 29069.95 29069.95 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD OF

R	eport Covering the Period: From:		09 / 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)	2537.00	8079.00
	(ii) Unitemized	971.00	15039.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	3508.00	23118.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
10	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) Transfers From Affiliated/Other	3508.00	23118.00
12.	Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
17	to Federal Candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts (Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00
	(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))▶	3508.00	23118.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	3508.00	23118.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures: (a) Allocated Federal/Non-Federal		Calonida Tour to Date		
Activity (from Schedule H4)	0.00	0.00		
(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	0.00	0.00		
(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	0.00	0.00		
Committees	0.00	0.00		
Contributions to Federal Candidates/Committees and Other Political Committees	0.00	11000.00		
Independent Expenditures (use Schedule E)	0.00	0.00		
Coordinated Party Expenditures	0.00	0.00		
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans MadeRefunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	7 7 7	4 1 1 4 1 1 4		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00		
Other Disbursements (Including				
Non-Federal Donations)	4300.00	20000.00		
,	4 4	4 4		
Federal Election Activity (52 U.S.C. § 30101(2 (a) Allocated Federal Election Activity	20))			
(from Schedule H6)				
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid		4 4		
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		
	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	4300.00	31000.00		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	4300.00	31000.00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 3508.00 23118.00 (from Line 11(d), page 3) 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 23118.00 3508.00 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 0.00 0.00 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 0.00 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 0.00 0.00 (subtract Line 37 from Line 36)

FOR LINE NUMBER: PAGE Use separate schedule(s) (check only one) **X** 11a 11b 11c

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for each category of the 12 Detailed Summary Page 13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Allen, Janet Michelle, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7413 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Compensation/HR Projects Mgr. Blue Cross Blue Shield of Arizona. Inc Receipt For: Aggregate Year-to-Date ▼ Primary General 588.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Araiza, Teresa M, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7177 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of Arizona, Inc. Director, Claims Regional Office Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Araiza, Teresa M, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 09 2018 City State Zip Code Transaction ID: SA11AI.7265 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of Arizona, Inc Director, Claims Regional Office Receipt For: Aggregate Year-to-Date ▼ Primary General 640.00 Other (specify) 122.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 7 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

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Detailed Summary Page 13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Araiza, Teresa M,,, Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7359 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Director, Claims Regional Office Blue Cross Blue Shield of Arizona. Inc Receipt For: Aggregate Year-to-Date ▼ Primary General 680.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Arthur, William D, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7178 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ V. P. Finance Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 375.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Arthur, William D, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 09 2018 City State Zip Code Transaction ID: SA11AI.7266 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ V. P. Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

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

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(check only one)									
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Detailed Summary Page 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Arthur, William D, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7360 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ V. P. Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 425.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Arvin, Michael, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7255 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Mgr- Cloud Services Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 450.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Arvin, Michael, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 09 2018 City State Zip Code Transaction ID: SA11AI.7267 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Mgr- Cloud Services Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) 85.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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11	EMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12							
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\rangle	NAME OF COMMITTEE (In Full) HEALTHY GOVERNMENT COMMITTEE-THE F OF	POLITICAL ACTION COMMITT	EE OF BLUE CROSS & BLUE SHIELD							
۹.	Full Name of Individual (Last, First, Middle Initial) or Ful Arvin, Michael, , ,	Il Organization Name	Date of Receipt							
	Mailing Address 2444 W. Las Palmaritas Drive	09 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
	City State	Zip Code	Transaction ID : SA11AI.7430							
	Phoenix AZ	85021	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.		30.00							
	, , ,	Occupation (for Individual) Mgr- Cloud Services	Memo Item							
	Descipt For:	ate Year-to-Date ▼								
	Primary General Other (specify) ▼	510.00								
3.	Full Name of Individual (Last, First, Middle Initial) or Ful Aspery, Daniel P, , ,	II Organization Name	Date of Receipt							
	Mailing Address 2444 W. Las Palmaritas Drive	08 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
	City State Phoenix AZ	Zip Code 85021	Transaction ID : SA11AI.7202 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.		20.00 Memo Item							
	Dive Crees Dive Chiefel of A.7	Occupation (for Individual) Corp Medical Dir-Clinical Ops								
	Receipt For: Primary General Other (specify) ▼ Aggrega	ate Year-to-Date ▼ 300.00								
	Full Name of Individual (Last, First, Middle Initial) or Ful Aspery, Daniel P, , ,	Il Organization Name	Date of Receipt							
	Mailing Address 2444 W. Las Palmaritas Drive		09							
	City State Phoenix AZ	Zip Code 85021	Transaction ID : SA11AI.7268 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	20.00								
	Blue Cross Blue Shield of AZ	Occupation (for Individual) Corp Medical Dir-Clinical Ops	Memo Item							
	Receipt For: Primary General Other (specify) Aggregation	ate Year-to-Date ▼ 320.00								
s	UBTOTAL of Receipts This Page (optional)		70.00							
Т	OTAL This Period (last page this line number only)	>								

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13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Aspery, Daniel P, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7384 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Corp Medical Dir-Clinical Ops Blue Cross Blue Shield of AZ Receipt For: Aggregate Year-to-Date ▼ Primary General 340.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Beranek, Kathi Jean Tees, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7231 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ **Dir- Government Relations** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 225.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Beranek, Kathi Jean Tees, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 09 2018 City State Zip Code Transaction ID: SA11AI.7270 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ **Dir- Government Relations** Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) 50.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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Detailed Summary Page 13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Beranek, Kathi Jean Tees, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7409 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ **Dir- Government Relations** Receipt For: Aggregate Year-to-Date ▼ Primary General 255.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Brutlag, James A, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7172 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of Arizona, Inc. V.P. Underwriting & Actuarial Services Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Brutlag, James A, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 09 2018 City State Zip Code Transaction ID: SA11AI.7275 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of Arizona, Inc V.P. Underwriting & Actuarial Services Receipt For: Aggregate Year-to-Date ▼ Primary General 640.00 Other (specify) 95.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

	FOF	R LINE	NU	IMBER	:	PAGE	-	12 OF	-	46
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for each category of the Detailed Summary Page	×	11a		11b		11c		12		
		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Brutlag, James A, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7354 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) V.P. Underwriting & Actuarial Services Blue Cross Blue Shield of Arizona. Inc Receipt For: Aggregate Year-to-Date ▼ Primary General 680.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Buchta, Kathy Lynn, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 80 2018 City State Zip Code Transaction ID: SA11AI.7258 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Medcl Rgltn Polcy & Reviw Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 225.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Buchta, Kathy Lynn, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 09 2018 City State Zip Code Transaction ID: SA11AI.7276 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Medcl Rgltn Polcy & Reviw Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) 70.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Buchta, Kathy Lynn, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7432 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Medcl Rgltn Polcy & Reviw Receipt For: Aggregate Year-to-Date ▼ Primary General 255.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Chandler, Helen J, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7168 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Sr. V.P. Chief Service Officer Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 375.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Chandler, Helen J, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 09 2018 City State Zip Code Transaction ID: SA11AI.7279 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Sr. V.P. Chief Service Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 65.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

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13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Chandler, Helen J, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7350 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Sr. V.P. Chief Service Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 425.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DiChiara, Jennifer Carol, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7205 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ **Dir-Provider Quality Assurance** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 225.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. DiChiara, Jennifer Carol, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 09 2018 City State Zip Code Transaction ID: SA11AI.7284 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir-Provider Quality Assurance Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) 55.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... ___

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for each category of the Detailed Summary Page	×	11a		11b		11c		12		
		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name DiChiara, Jennifer Carol, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7387 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Dir-Provider Quality Assurance Blue Cross Blue Shield of AZ Receipt For: Aggregate Year-to-Date ▼ Primary General 255.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Ettling, Kimberly M, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 80 2018 City State Zip Code Transaction ID: SA11AI.7194 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Federal Employee Program Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 225.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Ettling, Kimberly M., , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 09 2018 City State Zip Code Transaction ID: SA11AI.7289 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Federal Employee Program Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) 45.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... -

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for each category of the Detailed Summary Page 13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ettling, Kimberly M, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7376 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Federal Employee Program Receipt For: Aggregate Year-to-Date ▼ Primary General 255.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Ginzinger, Beth B, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7260 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 225.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Ginzinger, Beth B, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 09 2018 City State Zip Code Transaction ID: SA11AI.7293 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 65.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 17 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) HEALTHY GOVERNMENT COMMITTE OF	EE-THE POLITICAL ACTION COMMITT	TEE OF BLUE CROSS & BLUE SHIELD
Full Name of Individual (Last, First, Middle Ini Ginzinger, Beth B, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General Other (specify)	State AZ Zip Code 85021 C Occupation (for Individual) Aggregate Year-to-Date 275.00	Date of Receipt M M J 23 2018 Transaction ID : SA11AI.7434 Amount of Each Receipt this Period 25.00 Memo Item
Full Name of Individual (Last, First, Middle Ini Jackson, Sherilyn M, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)		Date of Receipt Mark
Full Name of Individual (Last, First, Middle Ini Jackson, Sherilyn M, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)		Date of Receipt M 09
SUBTOTAL of Receipts This Page (optional)		55.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 18 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and St or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) HEALTHY GOVERNMENT COMMITTE OF	E-THE PO	DLITICAL ACTION COMMITT	EE OF BLUE CROSS & BLUE SHIELD
Full Name of Individual (Last, First, Middle Initial Jackson, Sherilyn M, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)	State AZ C Occ CNo Aggregate	Zip Code 85021 cupation (for Individual) O, VP Operations Engineering Year-to-Date ▼	Date of Receipt M M M / 23 / 2018 Transaction ID: SA11AI.7363 Amount of Each Receipt this Period 15.00 Memo Item
Full Name of Individual (Last, First, Middle Initial Staufman, Jennifer Beth, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify) ▼	State AZ C	Zip Code 85021 Supation (for Individual) - Marketing & Corporate Comm Year-to-Date 300.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name of Individual (Last, First, Middle Initic Kaufman, Jennifer Beth, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)	State AZ C Occ VP-	Zip Code 85021 Supation (for Individual) Marketing & Corporate Comm Year-to-Date 320.00	Date of Receipt M 09 09 2018 Transaction ID: SA11AI.7301 Amount of Each Receipt this Period 20.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		······	55.00
TOTAL This Period (last page this line number of	only)	·····	7 7

FOR LINE NUMBER: PAGE 19 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

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13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kaufman, Jennifer Beth, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7429 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ VP- Marketing & Corporate Comm Receipt For: Aggregate Year-to-Date ▼ Primary General 340.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kehaly, Pamela Dianne, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7259 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ President/CEO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 350.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Kehaly, Pamela Dianne, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 09 2018 City State Zip Code Transaction ID: SA11AI.7302 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ President/CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) 70.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 20 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) HEALTHY GOVERNMENT COMMITTE OF	EE-THE PO	PLITICAL ACTION COMMITT	EE OF BLUE CROSS & BLUE SHIELD
Full Name of Individual (Last, First, Middle Init Kehaly, Pamela Dianne, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)	State AZ C Occ Pre	Zip Code 85021 Lupation (for Individual) sident/CEO Year-to-Date 400.00	Date of Receipt 9 23 2018 Transaction ID: SA11AI.7433 Amount of Each Receipt this Period 25.00 Memo Item
Full Name of Individual (Last, First, Middle Init Kimball, Molly Childers, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)	State AZ C	Zip Code 85021 Supation (for Individual) ief of Staff Year-to-Date 225.00	Date of Receipt 08 12 2018 Transaction ID : SA11AI.7217 Amount of Each Receipt this Period 15.00 Memo Item
Full Name of Individual (Last, First, Middle Init Kimball, Molly Childers, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)	State AZ C Occ Chie	Zip Code 85021 supation (for Individual) ef of Staff Year-to-Date 240.00	Date of Receipt 09 09 2018 Transaction ID: SA11AI.7304 Amount of Each Receipt this Period 15.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			55.00
TOTAL This Period (last page this line number	only)	······	

FOR LINE NUMBER: PAGE 21 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and St or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) HEALTHY GOVERNMENT COMMITTE OF	E-THE PO	LITICAL ACTION COMMITT	EE OF BLUE CROSS & BLUE SHIELD
Full Name of Individual (Last, First, Middle Initial Kimball, Molly Childers, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)	State AZ C	Zip Code 85021 Supation (for Individual) ef of Staff Year-to-Date ▼ 255.00	Date of Receipt Mo9 23 2018 Transaction ID: SA11AI.7396 Amount of Each Receipt this Period 15.00 Memo Item
Full Name of Individual (Last, First, Middle Initial Mack, Scott W, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify) ▼	State AZ C	Zip Code 85021 cupation (for Individual) - Actuarial Services Year-to-Date 225,00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name of Individual (Last, First, Middle Initial Mack, Scott W, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)	State AZ C Occ Dir-	Zip Code 85021 Lupation (for Individual) Actuarial Services Year-to-Date 240.00	Date of Receipt M M M O9 O9 2018 Transaction ID: SA11AI.7306 Amount of Each Receipt this Period 15.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		>	45.00
TOTAL This Period (last page this line number of	only)	>	

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for each category of the 12 Detailed Summary Page 13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mack, Scott W, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7365 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Actuarial Services Receipt For: Aggregate Year-to-Date ▼ Primary General 255.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Mandrola, Thomas M, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7249 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Large Group Sales/Support Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 225.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Mandrola, Thomas M, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 09 2018 City State Zip Code Transaction ID: SA11AI.7307 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Large Group Sales/Support Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) 45.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... ___

46 FOR LINE NUMBER: PAGE 23 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mandrola, Thomas M, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7424 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Large Group Sales/Support Receipt For: Aggregate Year-to-Date ▼ Primary General 255.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Mattson, Kathryn Denise, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7204 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Indiv/SG Sales & Support Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 225.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Mattson, Kathryn Denise, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 09 2018 City State Zip Code Transaction ID: SA11AI.7310 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Indiv/SG Sales & Support Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) 45.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	
Any information copied from such Reports and St or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) HEALTHY GOVERNMENT COMMITTE OF	E-THE PO	LITICAL ACTION COMMITT	EE OF BLUE CROSS & BLUE SHIELD
Full Name of Individual (Last, First, Middle Initimates) Mattson, Kathryn Denise, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)	State AZ C Occ Dir- Aggregate	Zip Code 85021 Eupation (for Individual) Indiv/SG Sales & Support Year-to-Date ▼ 255.00	Date of Receipt M M M
Full Name of Individual (Last, First, Middle Initial Mentz, Jody Kristine, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify) ▼	State AZ C	Zip Code 85021 Supation (for Individual) - ICS Production Support Year-to-Date 225.00	Date of Receipt 08 12 2018 Transaction ID : SA11AI.7180 Amount of Each Receipt this Period 15.00 Memo Item
Full Name of Individual (Last, First, Middle Initial Mentz, Jody Kristine, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)	State AZ C Occ Dir-	Zip Code 85021 supation (for Individual) ICS Production Support Year-to-Date 240.00	Date of Receipt M M M O9 09 2018 Transaction ID : SA11AI.7313 Amount of Each Receipt this Period 15.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		·····	45.00
TOTAL This Period (last page this line number of	only)	·····	

46 FOR LINE NUMBER: PAGE 25 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mentz, Jody Kristine, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7362 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Dir- ICS Production Support Blue Cross Blue Shield of AZ Receipt For: Aggregate Year-to-Date ▼ Primary General 255.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Messina, Elizabeth A, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7236 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 35.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of Arizona, Inc. Sr. V.P. CIO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 525.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Messner, Christopher M, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 12 2018 City State Zip Code Transaction ID: SA11AI.7238 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Speciality Enterprise Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) 65.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

46 FOR LINE NUMBER: PAGE 26 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

Detailed Summary Page 13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Messner, Christopher M,,,, Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7314 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Speciality Enterprise Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Messner, Christopher M, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7414 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Speciality Enterprise Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 255.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Meyer, Laura Gartland, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 12 2018 City State Zip Code Transaction ID: SA11AI.7219 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Special Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 50.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

46 FOR LINE NUMBER: PAGE 27 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Meyer, Laura Gartland, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7315 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Special Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Meyer, Laura Gartland, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7398 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Special Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 340.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Montgomery, Cynthia L, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 12 2018 City State Zip Code Transaction ID: SA11AI.7192 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ **VP-** Analytics Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) 55.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... ___

FOR LINE NUMBER: PAGE 28 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and Si or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) HEALTHY GOVERNMENT COMMITTE OF	E-THE PO	LITICAL ACTION COMMITT	EE OF BLUE CROSS & BLUE SHIELD
Full Name of Individual (Last, First, Middle Init Montgomery, Cynthia L, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)	State AZ C	Zip Code 85021 Supation (for Individual) Analytics Year-to-Date 240.00	Date of Receipt M
Full Name of Individual (Last, First, Middle Init Montgomery, Cynthia L, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify) Other (specify)	State AZ C	Zip Code 85021 cupation (for Individual) - Analytics Year-to-Date ▼ 255.00	Date of Receipt M M M
Full Name of Individual (Last, First, Middle Init Montoya, Marcus F, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)	State AZ C	Zip Code 85021 supation (for Individual) Provider Network Mgmt Year-to-Date ▼ 375.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional)		·····	55.00
TOTAL This Period (last page this line number of	only)	·····	

FOR LINE NUMBER: PAGE 29 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

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for each category of the 12 Detailed Summary Page 13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Montoya, Marcus F, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7317 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ V.P. Provider Network Mgmt Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Montoya, Marcus F, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7419 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ V.P. Provider Network Mgmt Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 425.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Napoli, James G, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 12 2018 City State Zip Code Transaction ID: SA11AI.7252 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Enterprise Med Dir-Health Vent Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) 65.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 30 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	
Any information copied from such Reports and Stor for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) HEALTHY GOVERNMENT COMMITTE OF	E-THE PO	DLITICAL ACTION COMMITT	EE OF BLUE CROSS & BLUE SHIELD
Full Name of Individual (Last, First, Middle Init Napoli, James G, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)	State AZ C Occ Ent Aggregate	Zip Code 85021 cupation (for Individual) cerprise Med Dir-Health Vent Year-to-Date ▼	Date of Receipt M
Full Name of Individual (Last, First, Middle Init Napoli, James G, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify) ▼	State AZ C	Zip Code 85021 cupation (for Individual) terprise Med Dir-Health Vent Year-to-Date ▼ 255.00	Date of Receipt M M M / D 23 / 2018 Transaction ID : SA11AI.7427 Amount of Each Receipt this Period 15.00 Memo Item
Full Name of Individual (Last, First, Middle Init O'reilly, Martha Y, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)	State AZ C	Zip Code 85021 Supation (for Individual) Operational Excellence Year-to-Date 225.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			45.00
TOTAL This Period (last page this line number of	only)		

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Detailed Summary Page 13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name O'reilly, Martha Y,,, Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7322 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ **Dir-Operational Excellence** Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. O'reilly, Martha Y, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7361 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Operational Excellence Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 255.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Roth, Tracy Lin, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 12 2018 City State Zip Code Transaction ID: SA11AI.7232 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ **Dir-Informatics** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 50.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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for each category of the Detailed Summary Page 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Roth, Tracy Lin, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7326 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ **Dir-Informatics** Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Roth, Tracy Lin, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7410 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ **Dir-Informatics** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 340.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Salazar, Deanna, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 12 2018 City State Zip Code Transaction ID: SA11AI.7207 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of Arizona, Inc Sr. V.P.- General Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 80.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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Detailed Summary Page 13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Salazar, Deanna, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7327 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sr. V.P.- General Counsel Blue Cross Blue Shield of Arizona. Inc Receipt For: Aggregate Year-to-Date ▼ Primary General 640.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Salazar, Deanna, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7389 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of Arizona, Inc. Sr. V.P.- General Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 680.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Semma, Mary M, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 12 2018 City State Zip Code Transaction ID: SA11AI.7182 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ V.P. Corporate Integrity Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) 105.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... ___

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	
Any information copied from such Reports and Stor for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) HEALTHY GOVERNMENT COMMITTE OF	E-THE PO	DLITICAL ACTION COMMITT	EE OF BLUE CROSS & BLUE SHIELD
Full Name of Individual (Last, First, Middle Init Semma, Mary M, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)	State AZ C Occ V.P Aggregate	Zip Code 85021 Supation (for Individual) C. Corporate Integrity Year-to-Date 400.00	Date of Receipt 109 109 109 2018 Transaction ID: SA11AI.7328 Amount of Each Receipt this Period 25.00 Memo Item
Full Name of Individual (Last, First, Middle Init Semma, Mary M, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify) Other (specify)	State AZ C	Zip Code 85021 Cupation (for Individual) Corporate Integrity Year-to-Date 425.00	Date of Receipt 09 23 2018 Transaction ID : SA11AI.7364 Amount of Each Receipt this Period 25.00 Memo Item
Full Name of Individual (Last, First, Middle Init Sowell, Scott M, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)	State AZ C Occ V.P.	Zip Code 85021 Supation (for Individual) Coperational Excellence Year-to-Date 375.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		·····	75.00
TOTAL This Period (last page this line number of	only)	·····	

FOR LINE NUMBER: PAGE 35 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Stat or for commercial purposes, other than using the n			
NAME OF COMMITTEE (In Full) HEALTHY GOVERNMENT COMMITTEE OF	-THE PO	LITICAL ACTION COMMITT	EE OF BLUE CROSS & BLUE SHIELD
Full Name of Individual (Last, First, Middle Initial A. Sowell, Scott M, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ	State AZ C Occ V.P	Zip Code 85021 upation (for Individual) . Operational Excellence Year-to-Date ▼ 400.00	Date of Receipt M M M O9 O9 2018 Transaction ID : SA11AI.7331 Amount of Each Receipt this Period 25.00 Memo Item
Full Name of Individual (Last, First, Middle Initial Sowell, Scott M, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)	State AZ Occ V.P	Zip Code 85021 upation (for Individual) Department of the control of the contro	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name of Individual (Last, First, Middle Initial Stelnik, Jeffrey M, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of Arizona, Inc Receipt For: Primary General Other (specify)	State AZ Occ Sr. V	Zip Code 85021 upation (for Individual) /.P. Strategy/Sales/Marketing Year-to-Date ▼ 525.00	Date of Receipt 08 12 2018 Transaction ID: SA11AI.7239 Amount of Each Receipt this Period 35.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		·····	85.00
TOTAL This Period (last page this line number on	ly)	>	

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Detailed Summary Page 13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Stelnik, Jeffrey M, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7333 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 35.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of Arizona, Inc Sr. V.P. Strategy/Sales/Marketing Receipt For: Aggregate Year-to-Date ▼ Primary General 560.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Stelnik, Jeffrey M, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7415 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 35.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of Arizona, Inc. Sr. V.P. Strategy/Sales/Marketing Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 595.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Stone, Deidra, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 12 2018 City State Zip Code Transaction ID: SA11AI.7184 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Claims Services Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

46 FOR LINE NUMBER: PAGE 37 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

Detailed Summary Page 13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Stone, Deidra, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7334 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Claims Services Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Stone, Deidra, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7366 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Claims Services Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 340.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Stuckey, Kimberly Dawn, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 12 2018 City State Zip Code Transaction ID: SA11AI.7250 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Production Support Svcs Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) 55.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... ___

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13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Stuckey, Kimberly Dawn, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7335 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Dir- Production Support Svcs Blue Cross Blue Shield of AZ Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Stuckey, Kimberly Dawn, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7425 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Production Support Svcs Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 255.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Tilton, Michael Poul, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 12 2018 City State Zip Code Transaction ID: SA11AI.7248 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ V.P. Sales Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) 55.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Tilton, Michael Poul, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7338 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ V.P. Sales Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Tilton, Michael Poul, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7423 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ V.P. Sales Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 425.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Tucker, Su S, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 12 2018 City State Zip Code Transaction ID: SA11AI.7193 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 70.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

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13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Tucker, Su S, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7341 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Tucker, Su S, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7375 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 340.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. VonBerge, Sherri Lynn, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 12 2018 City State Zip Code Transaction ID: SA11AI.7203 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir - Client Implementation Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) 65.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name VonBerge, Sherri Lynn, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City Zip Code State Transaction ID: SA11AI.7344 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir - Client Implementation Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. VonBerge, Sherri Lynn, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7385 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir - Client Implementation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 425.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Wandoloski, Matthew John, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 12 2018 City State Zip Code Transaction ID: SA11AI.7242 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ V.P. Strategy & Informatics Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(cneck only one)
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any pe e name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) HEALTHY GOVERNMENT COMMITT OF	EE-THE POLITICAL ACTION COMMITT	EE OF BLUE CROSS & BLUE SHIELD
Full Name of Individual (Last, First, Middle In Wandoloski, Matthew John, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)	State Zip Code 85021 C Occupation (for Individual) V.P. Strategy & Informatics Aggregate Year-to-Date 400.00	Date of Receipt M M M M O9 O9 2018 Transaction ID: SA11AI.7345 Amount of Each Receipt this Period 25.00 Memo Item
Full Name of Individual (Last, First, Middle In Wandoloski, Matthew John, , , Mailing Address 2444 W. Las Palmaritas Drive City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)	, ,	Date of Receipt M M M / D D J / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name of Individual (Last, First, Middle In Wells, Gregory S, , , Mailing Address 2444 W. Las Palmaritas Driv City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Blue Cross Blue Shield of AZ Receipt For: Primary General Other (specify)		Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional)		75.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 43 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

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for each category of the Detailed Summary Page 13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wells, Gregory S,,, Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 09 2018 City Zip Code State Transaction ID: SA11AI.7347 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) V.P. HR & Employee Development Blue Cross Blue Shield of AZ Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Wells, Gregory S, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 2018 City State Zip Code Transaction ID: SA11AI.7407 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ V.P. HR & Employee Development Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 425.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Winkler, Rachel Amanda, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 12 2018 City State Zip Code Transaction ID: SA11AI.7206 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Product & Risk Management Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) 65.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... ___

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Detailed Summary Page 13 14 15 16 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) HEALTHY GOVERNMENT COMMITTEE-THE POLITICAL ACTION COMMITTEE OF BLUE CROSS & BLUE SHIELD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Winkler, Rachel Amanda, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 09 2018 City Zip Code State Transaction ID: SA11AI.7348 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Product & Risk Management Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Winkler, Rachel Amanda, , , Date of Receipt Mailing Address 2444 W. Las Palmaritas Drive 09 2018 City State Zip Code Transaction ID: SA11AI.7388 ΑZ Phoenix 85021 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Blue Cross Blue Shield of AZ Dir- Product & Risk Management Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 255.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional)..... 2537.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		arate schedule(s)				
		category of the Summary Page				
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NAME OF COMMITTEE (In Full) HEALTHY GOVERNMENT COMMITTEE-THE		·				
Full Name (Last, First, Middle Initial) A. Brotherton for State House	Date of Disbursement					
Mailing Address 2034 W. Windsor Ave				08 21 2018		
City Phoenix Purpose of Disbursement	State AZ	Zip Code 85009		FEC Identification Number		
Candidate Name			Category/	Transaction ID : SB29.7450 Amount of Each Disbursement this Period		
Office Sought: House Senate President State: Disburser	ment For: Primary Other (spec	General Cify) ▼	Туре	400.00 Memo Item		
B. Ducey for Governor Mailing Address P.O. Box 12558				Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Tempe Purpose of Disbursement Candidate Name	State AZ	Zip Code 85284	Category/	FEC Identification Number C Transaction ID : SB29.7452 Amount of Each Disbursement this Period		
Office Sought: House Senate President State: District:	ment For: Primary Other (spec	General cify)	Type	1000.00 Memo Item		
Full Name (Last, First, Middle Initial) C. SIERRA FOR ARIZONA Mailing Address P.O Box 1002				Date of Disbursement M		
Cashion	State AZ	Zip Code 85329		FEC Identification Number		
Purpose of Disbursement Contribution to a nonfederal Political Action Commi Candidate Name	ittee		Category/ Type	Transaction ID: SB29.7437 Amount of Each Disbursement this Period		
Office Sought: House Disburser Senate	ment For: Primary	General	•••	300.00		

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SCHEDULE B (FEC Form 3X)	Hac see	poroto cobodula/-\	FOR LINE NUMBER: PAGE 46			
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NAME OF COMMITTEE (In Full)						
HEALTHY GOVERNMENT COMMITTEE-TH	E POLITICA	AL ACTION COM	MITTEE OF B	LUE CROSS	& BLUE SHIELD OF	
Full Name (Last, First, Middle Initial)				_		
A. Vote Nora Ellen				Date of Dis	sbursement	
Mailing Address 901 N. Alma School Road, Unit 8	34			08	21 2018	
City	State	Zip Code		FEC Identif	fication Number	
Chandler	AZ	85224			ication Number	
Purpose of Disbursement				C		
Candidate Name					action ID : SB29.7445	
Candidate Ivanie			Category/ Type	Amount of	Each Disbursement this Period	
Office Sought: House Disburs	sement For:		iype		300.00	
Senate	Primary	General				
President	Other (sp	ecify) 🔻		Memo	Item	
State: District:				LI WICHIO		
Full Name (Last, First, Middle Initial)						
B. Vote Rick Gray Senate				Date of Dis	sbursement	
Mailing Adduces and M. O. L. W. St.					28 2018	
Mailing Address 9521 W. Cedar Hill Circle				09	20 2010	
City	State	Zip Code		FEC Identif	fication Number	
City	AZ	85351			noanon Number	
Purpose of Disbursement				C		
Candidate Name					ction ID : SB29.7459	
Cardidate Name			Category/ Type	Amount of	Each Disbursement this Period	
Office Sought: House Disburs	sement For:		Турс		500.00	
Senate	Primary	General			7 4	
President Other (specify)				Memo	Item	
State: District:				Wichio	itom	
Full Name (Last, First, Middle Initial)				5		
C. WENINGER FOR AZ HOUSE					sbursement	
Mailing Address 1360 W. Camellia Ct				09 /	28 2018	
Maning / Idai 000 1000 W. Calliella Ct				55		
City	State	Zip Code		FEC Identif	fication Number	
Chandler	AZ	85286				
Purpose of Disbursement				C		
Candidate Name					action ID : SB29.7457	
Candidate Hame			Category/ Type	Amount of	Each Disbursement this Period	
Office Sought: House Disburs	sement For:		iypo		400.00	
Senate	Primary	General			7 4	
President	Other (sp	ecify) 🔻		Memo	Item	
State: District:				L WICHIO		
					1000.00	
SUBTOTAL of Disbursements This Page (optional))		·····•		1200.00	
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