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Blue Shield  
of California

An Independent Member  
of the Blue Shield Association

2004 OCT 15 A 11:05

October 14, 2004

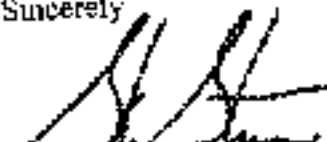
Andrea Needles, Senior Campaign Finance Analyst  
999 E Street, NW  
Washington, DC 20463


Dear Andrea:

After reviewing your letter, dated September 22<sup>nd</sup>, 2004, we have reviewed our records and found the source of errors in our Q2 - 2004 form 3x, which is duly amended and attached.

Please accept our apologies for the error, which we can put down to the change in administrative assistance in our office. Since Matt O'Neil will be working on these reports in future, we are much obliged for any guidance on particular items which we may have incorrectly reported, and remain available at 415-229-5989.

Sincerely

  
Steven Sturman,  
PAC Treasurer

  
Matt O'Neil  
Administrative Assistant



Matt O'Neil  
Lead Administrative Assistant

Corporate Finance and Administration  
50 Bay Street  
San Francisco, CA 94111  
Phone: 415 229-5989 Fax: 415 229-6209  
http://www.bshd.com



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

September 22, 2004

Steven Sturman, Treasurer  
Blue Shield of California Political Action Committee  
50 Beale St., 18<sup>th</sup> Floor  
San Francisco, CA 94105



**Response Due Date:**  
**October 22, 2004**

Identification Number: C00340364

Reference: July Quarterly Report (4/1/04-6/30/04)

Dear Mr. Sturman:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. **An adequate response must be received at the Commission by the response date noted above.** An itemization of the information needed follows:

-The totals listed on Lines 6c, 7, 11a, 23 and 29, Column B of the Summary and Detailed Summary Page(s) appear to be incorrect. Please be advised that you should add the "Calendar Year-to-Date" total from your previous report to the current "Total This Period" figure from Column A to derive the correct Column B totals. Please amend your report and any subsequent reports that may be affected by this correction.

**Unlike previous election cycles, you will not receive an additional notice from the Commission on this matter.** Adequate responses received on or before this date will be taken into consideration in determining whether audit action will be initiated. **Requests for extensions of time in which to respond will not be considered.** Failure to provide an adequate response by this date may result in an audit of the committee. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action.

Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather

than just those portions of the report that are being amended. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll-free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1142.

Sincerely,

*Andrea Needles*

Andrea Needles  
Senior Campaign Finance Analyst  
Reports Analysis Division

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED  
FED MAIL  
OPERATIONS CENTER  
2004 OCT 15 AM 05  
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4MS  
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION CO  
MMITTEE

ADDRESS (number and street) 150 BEALE STREET 18-109  
Check if different than previously reported. (AGC) SAN FRANCISCO CA 94108

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE  
000340364 3. IS THIS REPORT NEW OR AMENDED  
 (N)  (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on: \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on: \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 04 01 2004 through 06 30 2004

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer STEVEN STURMAN  
Signature of Treasurer [Signature] Date 10 14 2004

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form SX (Rev. 02/2009)

Write or Type Committee Name

Report Covering the Period: From: **04 01 2004** To: **01 30 2004**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. (a) Cash on Hand January 1, <b>2004</b>		<b>20,419.52</b>
(b) Cash on Hand at Beginning of Reporting Period	<b>31,616.84</b>	
(c) Total Receipts (from Line 19)	<b>18,167.82</b>	<b>20,445.43</b>
(d) Subtotal (add Lines 8(b) and 5(c) for Column A and Lines 8(a) and 5(c) for Column B)	<b>49,784.66</b>	<b>50,864.95</b>
7. Total Disbursements (from Line 31)	<b>12,539.91</b>	<b>14,620.70</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<b>37,244.75</b>	<b>36,244.25</b>
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (itemize all on 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  
959 E Street, NW  
Washington, DC 20463

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form SX (Rev. 02/2003)

Page 3

Write or Type Committee Name

Report Covering the Period: From: **04 01 2004** To: **06 30 2004**

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).....	9,743.34	16,685.67
(ii) Unitemized.....	8424.48	13,759.76
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	18,167.82	30,445.43
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contributions (add Lines 11(a)(i), (b), and (c)) (Carry Totals to Line 13, page 5).....▶	18,167.82	30,445.43
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received.....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds:		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5).....	0	0
(c) Total Transfers (add 18(a) and 18(b)).....	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	18,167.82	30,445.43
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	18,167.82	30,445.43

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0	0
(ii) Non-Federal Share .....	0	0
(b) Other Federal Operating Expenditures .....	0	0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	0	0
22. Transfers to Affiliated/Other Party Committees .....	5,500.00	7,500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	7,000.00	3,000.00
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441(d)) (use Schedule F) .....		
26. Loan Repayments Made .....		
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶		
29. Other Disbursements .....	58.45	1,299.44
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share .....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	12,558.45	14,639.24
32. Total Federal Disbursements (subtract Line 21(a)(i) and Line 30(a)(ii) from Line 31) ▶	12,558.45	14,639.24

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	18,167.82	30,445.43
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18,167.82	30,445.43
36. Total Federal Operating Expenditures (add Line 21(a)(1) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)		



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

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

FOR LINE NUMBER:		PAGE 7 / 18	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**BLUE SHIELD OF CALIFORNIA**

Full Name (Last, First, Middle Initial) <b>A. Christopher Gero</b>		Date of Receipt M / D / Y Y Y Y <b>06 / 30 / 2004</b>
Mailing Address: <b>6701 Center Drive West</b>		Transaction ID: <b>SA11A1.4117</b>
City: <b>Los Angeles</b>	State: <b>CA</b> Zip Code: <b>90045</b>	Amount of Each Receipt this Period <b>300.00</b>
FEC ID number of contributing federal political committee: <b>C</b>		Biweekly Payroll Deduction <b>\$50</b>
Name of Employer: <b>Blue Shield of California</b>	Occupation: <b>Employee</b>	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>300.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Brian Chosh</b>		Date of Receipt M / D / Y Y Y Y <b>06 / 30 / 2004</b>
Mailing Address: <b>4207 Town Center Blvd</b>		Transaction ID: <b>SA11A1.4119</b>
City: <b>El Dorado Hills</b>	State: <b>CA</b> Zip Code: <b>95762</b>	Amount of Each Receipt this Period <b>248.47</b>
FEC ID number of contributing federal political committee: <b>C</b>		Biweekly Payroll Deduction <b>\$35.21</b>
Name of Employer: <b>Blue Shield of California</b>	Occupation: <b>Vice President, Sales</b>	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>248.47</b>	

Full Name (Last, First, Middle Initial) <b>C. Peter Duncan</b>		Date of Receipt M / D / Y Y Y Y <b>06 / 30 / 2004</b>
Mailing Address: <b>6701 Center Drive West</b>		Transaction ID: <b>SA11A1.4121</b>
City: <b>Los Angeles</b>	State: <b>CA</b> Zip Code: <b>90045</b>	Amount of Each Receipt this Period <b>222.12</b>
FEC ID number of contributing federal political committee: <b>C</b>		Biweekly Payroll Deduction <b>00</b>
Name of Employer: <b>Blue Shield of California</b>	Occupation: <b>Employee</b>	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>222.12</b>	

SUBTOTAL of Receipts This Page (optional)	<b>768.69</b>
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 8/18  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (in Full)  
**BLUE SHIELD OF CALIFORNIA**

**A.** Full Name (Last, First, Middle Initial)  
Thomas Epstein

Mailing Address 50 Beale Street

City State Zip Code  
San Francisco CA 94105

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

Name of Employer: Blue Shield of California  
Occupation: Vice President, Public Affairs

Receipt For: Primary General Other (specify) \*  
Aggregate Year-to-Date \$: 250.50

Date of Receipt: MM / DD / YYYY  
06 / 30 / 2004

Transaction ID: SA11A1.4128  
Amount of Each Receipt this Period: 250.50  
Biweekly Payroll Deduction: \$38.50

**B.** Full Name (Last, First, Middle Initial)  
Lisa Ghosli

Mailing Address 50 Beale Street

City State Zip Code  
San Francisco CA 94105

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

Name of Employer: Blue Shield of California  
Occupation: Director

Receipt For: Primary General Other (specify) \*  
Aggregate Year-to-Date \$: 700.00

Date of Receipt: MM / DD / YYYY  
06 / 30 / 2004

Transaction ID: SA11A1.4128  
Amount of Each Receipt this Period: 700.00  
Biweekly Payroll Deduction: \$100

**C.** Full Name (Last, First, Middle Initial)  
Kevin Ginn

Mailing Address 50 Beale Street

City State Zip Code  
San Francisco CA 94105

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

Name of Employer: Blue Shield of California  
Occupation: Manager

Receipt For: Primary General Other (specify) \*  
Aggregate Year-to-Date \$: 300.00

Date of Receipt: MM / DD / YYYY  
06 / 30 / 2004

Transaction ID: SA11A1.4127  
Amount of Each Receipt this Period: 300.00  
Biweekly Payroll Deduction: \$50

SUBTOTAL of Receipts This Page (optional) **1250.50**

TOTAL This Period (last page for line number only)

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

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

FORM LINE NUMBER: (check only one)	PAGE 8 / 18
X 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/>	
13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 <input type="checkbox"/>	

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NAME OF COMMITTEE (in Full)  
**BLUE SHIELD OF CALIFORNIA**

**A.** Full Name (Last, First, Middle Initial)  
Martine Jackson

Mailing Address: 50 Beale Street

City: San Francisco State: CA Zip Code: 94105

FEC ID number of contributing federal political committee: C

Name of Employer: Blue Shield of California Occupation: Senior Vice President, Human Resources

Receipt For: Primary  General  Other (specify)

Aggregate Year-to-Date 349.72

Date of Receipt  
M / D / Y Y Y Y  
08 / 30 / 2004

Transaction ID: SA11A1.4129

Amount of Each Receipt This Period  
349.72

Biweekly Payroll Deduction  
\$49.96

**B.** Full Name (Last, First, Middle Initial)  
Heidi Kurz

Mailing Address: 50 Beale Street

City: San Francisco State: CA Zip Code: 94105

FEC ID number of contributing federal political committee: C

Name of Employer: Blue Shield of California Occupation: Chief Financial Officer

Receipt For: Primary  General  Other (specify)

Aggregate Year-to-Date 672.49

Date of Receipt  
M / D / Y Y Y Y  
08 / 30 / 2004

Transaction ID: SA11A1.4154

Amount of Each Receipt This Period  
672.49

Biweekly Payroll Deduction  
\$85.07

**C.** Full Name (Last, First, Middle Initial)  
Elaine Lange

Mailing Address: 50 Beale Street

City: San Francisco State: CA Zip Code: 94105

FEC ID number of contributing federal political committee: C

Name of Employer: Blue Shield of California Occupation: Chief Analytics Officer

Receipt For: Primary  General  Other (specify)

Aggregate Year-to-Date 485.73

Date of Receipt  
M / D / Y Y Y Y  
08 / 30 / 2004

Transaction ID: SA11A1.4155

Amount of Each Receipt This Period  
485.73

Biweekly Payroll Deduction  
\$69.39

SUBTOTAL of Receipts This Page (optional) 1507.94

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 10 of 18

(check only one)

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

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NAME OF COMMITTEE (in Full)  
BLUE SHIELD OF CALIFORNIA

Full Name (Last, First, Middle Initial) <b>A. Gerald Linna</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2004	
Mailing Address 4207 Town Center Blvd		Transaction ID: SA11A1.4158	
City El Dorado Hills	State CA	Zip Code 95782	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee C		Biweekly Payroll Deduction \$50	
Name of Employer Blue Shield of California	Occupation Employee		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Kathleen Lynaugh</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2004	
Mailing Address 50 Beale Street		Transaction ID: SA11A1.4157	
City San Francisco	State CA	Zip Code 94105	Amount of Each Receipt this Period 210.00
FEC ID number of contributing federal political committee C		Biweekly Payroll Deduction \$30.00	
Name of Employer Blue Shield of California	Occupation Employee		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) <b>C. Paul Markovich</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2004	
Mailing Address 50 Beale Street		Transaction ID: SA11A1.4158	
City San Francisco	State CA	Zip Code 94105	Amount of Each Receipt this Period 289.22
FEC ID number of contributing federal political committee C		Biweekly Payroll Deduction \$38.48	
Name of Employer Blue Shield of California	Occupation Employee		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 289.22		

SUBTOTAL of Receipts This Page (optional) ▶

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

779.22

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

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

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

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

NAME OF COMMITTEE (in full)  
BLUE SHIELD OF CALIFORNIA

**A.** Full Name (Last, First, Middle Initial)  
Robert Novak

Mailing Address 4207 Town Center Blvd

City State Zip Code  
El Dorado Hills CA 95762

FEC ID number of contributing federal political committee: C

Name of Employer: Blue Shield of California  
Occupation: Senior Vice President  
Aggregate Year-to-Date: 263.70

Receipt For: Primary General Other (specify)

Date of Receipt: 06 30 2004  
Transaction ID: SA11A1.4159  
Amount of Each Receipt this Period: 363.70  
Biweekly Payroll Deduction: \$51.97

**B.** Full Name (Last, First, Middle Initial)  
Chris Chenen

Mailing Address 8701 Center Drive West

City State Zip Code  
Los Angeles CA 90045

FEC ID number of contributing federal political committee: C

Name of Employer: Blue Shield of California  
Occupation: Senior Vice President  
Aggregate Year-to-Date: 508.41

Receipt For: Primary General Other (specify)

Date of Receipt: 06 30 2004  
Transaction ID: SA11A1.4160  
Amount of Each Receipt this Period: 508.41  
Biweekly Payroll Deduction: \$72.63

**C.** Full Name (Last, First, Middle Initial)  
Kenny Richards

Mailing Address 50 Beale Street

City State Zip Code  
San Francisco CA 94106

FEC ID number of contributing federal political committee: C

Name of Employer: Blue Shield of California  
Occupation: Director  
Aggregate Year-to-Date: 300.00

Receipt For: Primary General Other (specify)

Date of Receipt: 06 30 2004  
Transaction ID: SA11A1.4161  
Amount of Each Receipt this Period: 300.00  
Biweekly Payroll Deduction: \$50

SUBTOTAL of Receipts This Page (optional) 1172.20

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)  
or each category of the  
Detailed Statement Page

FOR LINE NUMBER: PAGE 12 / 18

(check only case)

X: 11a  11b  11c  12   
13  14  15  16  17

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

NAME OF COMMITTEE (In Full)  
BLUE SHIELD OF CALIFORNIA

**A.** Full Name (Last, First, Middle Initial)  
Lisa Rubino

Mailing Address 8300 Canoga Avenue

City State Zip Code  
Woodland Hills CA 91367

FEC ID number of contributing federal political committee: C

Name of Employer: Blue Shield of California  
Occupation: Senior Vice President

Receipt For: Primary General Other (specify)   
Aggregate Year-to-Date  $\Psi$  210.00

Date of Receipt  
M O N T H D A Y Y Y Y Y  
06 30 2004

Transaction ID: SA11A1.4162

Amount of Each Receipt this Period  
210.00

Biweekly Payroll Deduction  
\$30.00

**B.** Full Name (Last, First, Middle Initial)  
Gerald Spornon

Mailing Address 8300 Canoga Avenue

City State Zip Code  
Woodland Hills CA 91367

FEC ID number of contributing federal political committee: C

Name of Employer: Blue Shield of California  
Occupation: Medical Director

Receipt For: Primary General Other (specify)   
Aggregate Year-to-Date  $\Psi$  245.28

Date of Receipt  
M O N T H D A Y Y Y Y Y  
06 30 2004

Transaction ID: SA11A1.4163

Amount of Each Receipt this Period  
245.28

Biweekly Payroll Deduction  
\$35.04

**C.** Full Name (Last, First, Middle Initial)  
Nancy Stalker

Mailing Address 60 Beale Street

City State Zip Code  
San Francisco CA 94105

FEC ID number of contributing federal political committee: C

Name of Employer: Blue Shield of California  
Occupation: Vice President, Pharmacy Services

Receipt For: Primary General Other (specify)   
Aggregate Year-to-Date  $\Psi$  210.00

Date of Receipt  
M O N T H D A Y Y Y Y Y  
06 30 2004

Transaction ID: SA11A1.4164

Amount of Each Receipt this Period  
210.00

Biweekly Payroll Deduction  
\$30

SUBTOTAL of Receipts This Page (optional)  $\blacktriangleright$  665.28

TOTAL This Period (last page this line number only)  $\blacktriangleright$

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

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

FOR LINE NUMBER:		PAGE 13/18	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**BLUE SHIELD OF CALIFORNIA**

**A.** Full Name (Last, First, Middle Initial)  
Susan Steiner

Mailing Address 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation Marketing Manager

Receipt For: Primary General Other (specify)  Aggregate Year-to-Date **270.00**

Date of Receipt  
M / D / Y  
08 / 30 / 2004

Transaction ID: SA11A14168

Amount of Each Receipt this Period  
**270.00**

Biweekly Payroll Deduction  
**\$45**

**B.** Full Name (Last, First, Middle Initial)  
Escobed Stone

Mailing Address 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation Senior Director

Receipt For: Primary General Other (specify)  Aggregate Year-to-Date **350.00**

Date of Receipt  
M / D / Y  
08 / 30 / 2004

Transaction ID: SA11A14168

Amount of Each Receipt this Period  
**350.00**

Biweekly Payroll Deduction  
**\$50**

**C.** Full Name (Last, First, Middle Initial)  
Lyle Swinko

Mailing Address 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation Counsel

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

Date of Receipt  
M / D / Y  
08 / 30 / 2004

Transaction ID: SA11A14167

Amount of Each Receipt this Period  
**280.00**

Biweekly Payroll Deduction  
**\$40**

**SUBTOTAL** of Receipts This Page (optional) **900.00**

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

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

List separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER:		PAGE 14 / 18	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (in Full)  
**BLUE SHIELD OF CALIFORNIA**

**A.** Full Name (Last, First, Middle Initial)  
Paul Swensell

Mailing Address: 50 Beale Street

City: San Francisco State: CA Zip Code: 94105

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

Name of Employer: Blue Shield of California Occupation: Executive Vice President

Receipt For: Primary General Other (specify)  Aggregate Year-to-Date: 420.00

Date of Receipt  
M N I D O J Y Y Y Y  
06 30 2004

Transaction ID: SA11A1.4108

Amount of Each Receipt this Period  
420.00

Biweekly Payroll Deduction  
\$80

**B.** Full Name (Last, First, Middle Initial)  
Keresh Wood

Mailing Address: 50 Beale Street

City: San Francisco State: CA Zip Code: 94105

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

Name of Employer: Blue Shield of California Occupation: Chief Operating Officer

Receipt For: Primary General Other (specify)  Aggregate Year-to-Date: 785.61

Date of Receipt  
M N I D O J Y Y Y Y  
06 30 2004

Transaction ID: SA11A1.4108

Amount of Each Receipt this Period  
785.61

Biweekly Payroll Deduction  
\$112.23

**C.** Full Name (Last, First, Middle Initial)  
John Yeo

Mailing Address: 4207 Town Center Blvd

City: El Dorado Hills State: CA Zip Code: 94782

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

Name of Employer: Blue Shield of California Occupation: Senior Medical Director

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

Date of Receipt  
M N I D O J Y Y Y Y  
06 30 2004

Transaction ID: SA11A1.4170

Amount of Each Receipt this Period  
600.00

Biweekly Payroll Deduction  
\$100

SUBTOTAL of Receipts This Page (optional) ▶

1805.61

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

9743.34



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 18

<input type="checkbox"/> 21a	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (by Full)  
BLUE SHIELD OF CALIFORNIA

A. Full Name (Last, First, Middle Initial)  
BSBSA Blue PAC

Transaction ID: SE22.4281  
Date of Disbursement

Mailing Address: 1370 G Street N.W.  
c/o Berry Trimble

M M M D D Y Y Y Y  
04 14 2004

City: Washington State: DC Zip Code: 20005

Amount of Each Disbursement this Period

Purpose of Disbursement:  
Contribution

011  
Category/  
Type

5500.00

Candidate Name:  
BSBSA Blue PAC

Office Sought: House Senate President  
State: District

Disbursement For: Primary General Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

5500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 18

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 29c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30a
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NAME OF COMMITTEE (in Full)  
BLUE SHIELD OF CALIFORNIA

A. Full Name (Last, First, Middle Initial)  
AAHP/HIAA ASSOCIATION PAC

Transaction ID: SB23.4300  
Date of Disbursement

04 / 05 / 2004

Mailing Address 801 Penn. Avenue NW  
#500 South Bldg.

City WASHINGTON State DC Zip Code 20004

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement  
Contribution

011  
Category/  
Type

Candidate Name

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

State: District:

B. Full Name (Last, First, Middle Initial)  
Jerry Lewis for Congress

Transaction ID: SB23.4292  
Date of Disbursement

04 / 22 / 2004

Mailing Address PO BOX 247

City Redlands State CA Zip Code 92373

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement  
Disbursement

Category/  
Type

Candidate Name

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

State: CA District:

C. Full Name (Last, First, Middle Initial)  
MIKE THOMPSON FOR CONGRESS

Transaction ID: SB23.4289  
Date of Disbursement

04 / 18 / 2004

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement  
Disbursement

011  
Category/  
Type

Candidate Name

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

State: CA District: 01

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 18

<input type="checkbox"/> 21a	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30a

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NAME OF COMMITTEE (in Full)  
BLUE SHIELD OF CALIFORNIA

Full Name (Last, First, Middle Initial)

A. Solidarity PAC

Transaction ID: SE23.4253

Date of Disbursement

04 / 30 / 2004

Mailing Address 301 4th Street N.E.

City Washington State DC Zip Code 20002

Amount of Each Disbursement This Period

500.00

Purpose of Disbursement  
Disbursement

011  
Category/  
Type

Candidate Name

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

State: District:

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

500.00

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

7000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (in Full)  
BLUE SHIELD OF CALIFORNIA

Full Name (Last, First, Middle Initial)

**A. Fees Bank**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Transaction ID: SB29.4304

Date of Disbursement

04 / 28 / 2004

Amount of Each Disbursement this Period

18.54

**B. Fees Bank**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Transaction ID: SB29.4294

Date of Disbursement

05 / 25 / 2004

Amount of Each Disbursement this Period

18.54

**C. Fees Bank**

Mailing Address

City State Zip Code

Purpose of Disbursement

Account Analysis Charge

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB29.4283

Date of Disbursement

06 / 25 / 2004

Amount of Each Disbursement this Period

21.37

SUBTOTAL of Disbursements This Page (optional)

58.45

TOTAL This Period (last page this line number only)

58.45

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE  
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>FedEx</i>	Shipping Date <i>10-14-04</i>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>JCI</i> PREPARER (5/2004)	<i>10-15-04</i> DATE PREPARED