

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="84427.86"/>	<input type="text" value="84427.86"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="35337.91"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="40621.29"/>	<input type="text" value="76281.34"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="75959.20"/>	<input type="text" value="160709.20"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="21000.17"/>	<input type="text" value="105750.17"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="54959.03"/>	<input type="text" value="54959.03"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

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

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).....	35708.96	58816.89
(ii) Unitemized	4912.33	17464.45
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	40621.29	76281.34
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	40621.29	76281.34
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	40621.29	76281.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	40621.29	76281.34

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	9000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.17	0.17
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.17	0.17
29. Other Disbursements	18000.00	96750.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	21000.17	105750.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21000.17	105750.17

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	40621.29	76281.34
34. Total Contribution Refunds (from Line 28(d))	0.17	0.17
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	40621.12	76281.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. H Jorgenia Abernathy			Date of Receipt
Mailing Address 108 Hoteling Ct			<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11Al.107994
Chapel Hill	NC	27514	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="133.38"/>
Name of Employer	Occupation		
BCBSNC	VP		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="920.61"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. H Jorgenia Abernathy			Date of Receipt
Mailing Address 108 Hoteling Ct			<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11Al.108125
Chapel Hill	NC	27514	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="133.38"/>
Name of Employer	Occupation		
BCBSNC	VP		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1053.99"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. H Jorgenia Abernathy			Date of Receipt
Mailing Address 108 Hoteling Ct			<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11Al.108271
Chapel Hill	NC	27514	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="133.38"/>
Name of Employer	Occupation		
BCBSNC	VP		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1187.37"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="400.14"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. H Jorgenia Abernathy
Full Name (Last, First, Middle Initial)

Mailing Address 108 Hoteling Ct

City Chapel Hill State NC Zip Code 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1320.75

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2014
Transaction ID : SA11AI.108402

Amount of Each Receipt this Period
 133.38

B. H Jorgenia Abernathy
Full Name (Last, First, Middle Initial)

Mailing Address 108 Hoteling Ct

City Chapel Hill State NC Zip Code 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1454.13

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : SA11AI.108536

Amount of Each Receipt this Period
 133.38

C. H Jorgenia Abernathy
Full Name (Last, First, Middle Initial)

Mailing Address 108 Hoteling Ct

City Chapel Hill State NC Zip Code 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1587.51

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : SA11AI.108663

Amount of Each Receipt this Period
 133.38

SUBTOTAL of Receipts This Page (optional).....▶	400.14
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. H Jorgenia Abernathy
Full Name (Last, First, Middle Initial)

Mailing Address 108 Hoteling Ct

City Chapel Hill State NC Zip Code 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1720.89**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014

Transaction ID : SA11AI.108791

Amount of Each Receipt this Period
133.38

B. Bradley Adcock
Full Name (Last, First, Middle Initial)

Mailing Address 106 Lindenthal Court

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **744.45**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2014

Transaction ID : SA11AI.107996

Amount of Each Receipt this Period
106.35

C. Bradley Adcock
Full Name (Last, First, Middle Initial)

Mailing Address 106 Lindenthal Court

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.80**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11AI.108127

Amount of Each Receipt this Period
106.35

SUBTOTAL of Receipts This Page (optional).....▶	346.08
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Bradley Adcock		Date of Receipt
Mailing Address 106 Lindenthal Court		<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cary	NC	27513
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.108273
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="106.35"/>
Name of Employer	Occupation	
BCBSNC	Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="957.15"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Bradley Adcock		Date of Receipt
Mailing Address 106 Lindenthal Court		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cary	NC	27513
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.108404
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="106.35"/>
Name of Employer	Occupation	
BCBSNC	Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1063.50"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Bradley Adcock		Date of Receipt
Mailing Address 106 Lindenthal Court		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cary	NC	27513
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.108538
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="106.35"/>
Name of Employer	Occupation	
BCBSNC	Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1169.85"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="319.05"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Bradley Adcock
Full Name (Last, First, Middle Initial)
Mailing Address 106 Lindenthal Court
City Cary State NC Zip Code 27513
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Vice President
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1276.20**

Date of Receipt **06 / 13 / 2014**
Transaction ID : SA11AI.108665
Amount of Each Receipt this Period **106.35**

B. Bradley Adcock
Full Name (Last, First, Middle Initial)
Mailing Address 106 Lindenthal Court
City Cary State NC Zip Code 27513
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Vice President
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1382.55**

Date of Receipt **06 / 27 / 2014**
Transaction ID : SA11AI.108793
Amount of Each Receipt this Period **106.35**

C. Daniel Atherton
Full Name (Last, First, Middle Initial)
Mailing Address 8800 Hatton Court
City Charlotte State NC Zip Code 28277
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Regional Sales Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **476.11**

Date of Receipt **04 / 04 / 2014**
Transaction ID : SA11AI.107999
Amount of Each Receipt this Period **74.75**

SUBTOTAL of Receipts This Page (optional)..... **287.45**
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 150
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial)
A. Daniel Atherton

Mailing Address 8800 Hatton Court

City State Zip Code
Charlotte NC 28277

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

Name of Employer Occupation
BCBSNC Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.86

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2014
Transaction ID : SA11AI.108130

Amount of Each Receipt this Period
74.75

Full Name (Last, First, Middle Initial)
B. Daniel Atherton

Mailing Address 8800 Hatton Court

City State Zip Code
Charlotte NC 28277

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

Name of Employer Occupation
BCBSNC Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.61

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2014
Transaction ID : SA11AI.108276

Amount of Each Receipt this Period
74.75

Full Name (Last, First, Middle Initial)
C. Daniel Atherton

Mailing Address 8800 Hatton Court

City State Zip Code
Charlotte NC 28277

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

Name of Employer Occupation
BCBSNC Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2014
Transaction ID : SA11AI.108407

Amount of Each Receipt this Period
74.75

SUBTOTAL of Receipts This Page (optional)..... ▶ 224.25

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Daniel Atherton
Full Name (Last, First, Middle Initial)

Mailing Address 8800 Hatton Court

City Charlotte State NC Zip Code 28277

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

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **775.11**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : SA11AI.108541

Amount of Each Receipt this Period
74.75

B. Daniel Atherton
Full Name (Last, First, Middle Initial)

Mailing Address 8800 Hatton Court

City Charlotte State NC Zip Code 28277

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

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **849.86**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2014

Transaction ID : SA11AI.108668

Amount of Each Receipt this Period
74.75

C. Daniel Atherton
Full Name (Last, First, Middle Initial)

Mailing Address 8800 Hatton Court

City Charlotte State NC Zip Code 28277

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

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **924.61**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014

Transaction ID : SA11AI.108796

Amount of Each Receipt this Period
74.75

SUBTOTAL of Receipts This Page (optional)..... ▶ **224.25**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Jeffrey Barber
 Full Name (Last, First, Middle Initial)
 Mailing Address 605 Chalfant Court
 City Raleigh State NC Zip Code 27607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : SA11AI.108920
 Amount of Each Receipt this Period
 166.34
 contribution

B. Gary Bolt
 Full Name (Last, First, Middle Initial)
 Mailing Address 4801 Highgate Drive
 City Durham State NC Zip Code 27713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BCBSNC VP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 496.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2014
Transaction ID : SA11AI.108002
 Amount of Each Receipt this Period
 72.03

C. Gary Bolt
 Full Name (Last, First, Middle Initial)
 Mailing Address 4801 Highgate Drive
 City Durham State NC Zip Code 27713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BCBSNC VP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 568.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2014
Transaction ID : SA11AI.108133
 Amount of Each Receipt this Period
 72.03

SUBTOTAL of Receipts This Page (optional)..... ▶ 310.40
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Gary Bolt
Full Name (Last, First, Middle Initial)
Mailing Address 4801 Highgate Drive
City Durham State NC Zip Code 27713
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 641.02

Date of Receipt
05 / 02 / 2014
Transaction ID : SA11AI.108279
Amount of Each Receipt this Period 72.03

B. Gary Bolt
Full Name (Last, First, Middle Initial)
Mailing Address 4801 Highgate Drive
City Durham State NC Zip Code 27713
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 713.05

Date of Receipt
05 / 16 / 2014
Transaction ID : SA11AI.108414
Amount of Each Receipt this Period 72.03

C. Gary Bolt
Full Name (Last, First, Middle Initial)
Mailing Address 4801 Highgate Drive
City Durham State NC Zip Code 27713
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 785.08

Date of Receipt
05 / 30 / 2014
Transaction ID : SA11AI.108546
Amount of Each Receipt this Period 72.03

SUBTOTAL of Receipts This Page (optional)..... ▶ 216.09
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Gary Bolt
Full Name (Last, First, Middle Initial)
Mailing Address 4801 Highgate Drive
City Durham State NC Zip Code 27713
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 857.11

Date of Receipt
06 / 13 / 2014
Transaction ID : SA11AI.108673
Amount of Each Receipt this Period 72.03

B. Gary Bolt
Full Name (Last, First, Middle Initial)
Mailing Address 4801 Highgate Drive
City Durham State NC Zip Code 27713
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 929.14

Date of Receipt
06 / 27 / 2014
Transaction ID : SA11AI.108801
Amount of Each Receipt this Period 72.03

C. H Lewis Borman
Full Name (Last, First, Middle Initial)
Mailing Address 104 Ironwoods Drive
City Chapel Hill State NC Zip Code 27516
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Program Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 213.71

Date of Receipt
06 / 13 / 2014
Transaction ID : SA11AI.108675
Amount of Each Receipt this Period 18.03

SUBTOTAL of Receipts This Page (optional)..... ▶ 162.09
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 150
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. H Lewis Borman
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 Ironwoods Drive
 City Chapel Hill State NC Zip Code 27516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Program Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.74

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : SA11AI.108803
 Amount of Each Receipt this Period
 18.03

B. W Don Bradley
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 Altmont Ct
 City Durham State NC Zip Code 27705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1346.10

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2014
Transaction ID : SA11AI.108005
 Amount of Each Receipt this Period
 192.30

c. W Don Bradley
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 Altmont Ct
 City Durham State NC Zip Code 27705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1538.40

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2014
Transaction ID : SA11AI.108136
 Amount of Each Receipt this Period
 192.30

SUBTOTAL of Receipts This Page (optional).....▶	402.63
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Danielle breslin
Full Name (Last, First, Middle Initial)

Mailing Address 7200 Waltridge Place

City Holly Springs State NC Zip Code 27540

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : SA11Al.108549

Amount of Each Receipt this Period
 20.00

B. Danielle breslin
Full Name (Last, First, Middle Initial)

Mailing Address 7200 Waltridge Place

City Holly Springs State NC Zip Code 27540

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : SA11Al.108676

Amount of Each Receipt this Period
 20.00

C. Danielle breslin
Full Name (Last, First, Middle Initial)

Mailing Address 7200 Waltridge Place

City Holly Springs State NC Zip Code 27540

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : SA11Al.108804

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. L Wade Brown
Full Name (Last, First, Middle Initial)
Mailing Address 389 Highland Dr

City Lexington	State NC	Zip Code 27292
-------------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Producer Manager
----------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05	/	02	/	2014

Transaction ID : SA11Al.108285

Amount of Each Receipt this Period
25.00

B. L Wade Brown
Full Name (Last, First, Middle Initial)
Mailing Address 389 Highland Dr

City Lexington	State NC	Zip Code 27292
-------------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Producer Manager
----------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05	/	16	/	2014

Transaction ID : SA11Al.108420

Amount of Each Receipt this Period
25.00

C. L Wade Brown
Full Name (Last, First, Middle Initial)
Mailing Address 389 Highland Dr

City Lexington	State NC	Zip Code 27292
-------------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Producer Manager
----------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05	/	30	/	2014

Transaction ID : SA11Al.108552

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. L Wade Brown
Full Name (Last, First, Middle Initial)
Mailing Address 389 Highland Dr
City Lexington State NC Zip Code 27292
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Producer Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
06 / 13 / 2014
Transaction ID : SA11AI.108679
Amount of Each Receipt this Period
25.00

B. L Wade Brown
Full Name (Last, First, Middle Initial)
Mailing Address 389 Highland Dr
City Lexington State NC Zip Code 27292
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Producer Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt
06 / 27 / 2014
Transaction ID : SA11AI.108807
Amount of Each Receipt this Period
25.00

C. William Bryan
Full Name (Last, First, Middle Initial)
Mailing Address One Cumcumber Blvd
City Mt Olive State NC Zip Code 28365
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation President- Mt Olive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
06 / 13 / 2014
Transaction ID : SA11AI.108924
Amount of Each Receipt this Period
200.00
contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Andrew Brynes
Full Name (Last, First, Middle Initial)

Mailing Address 3919 Juniper Rd

City Baltimore State MD Zip Code 21218

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **767.34**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2014

Transaction ID : SA11Al.108010

Amount of Each Receipt this Period
109.62

B. Andrew Brynes
Full Name (Last, First, Middle Initial)

Mailing Address 3919 Juniper Rd

City Baltimore State MD Zip Code 21218

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **876.96**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11Al.108141

Amount of Each Receipt this Period
109.62

C. Andrew Brynes
Full Name (Last, First, Middle Initial)

Mailing Address 3919 Juniper Rd

City Baltimore State MD Zip Code 21218

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **986.58**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : SA11Al.108286

Amount of Each Receipt this Period
109.62

SUBTOTAL of Receipts This Page (optional).....▶	328.86
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Andrew Brynes
Full Name (Last, First, Middle Initial)

Mailing Address 3919 Juniper Rd

City Baltimore State MD Zip Code 21218

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1096.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2014
Transaction ID : SA11AI.108421

Amount of Each Receipt this Period
 109.62

B. Andrew Brynes
Full Name (Last, First, Middle Initial)

Mailing Address 3919 Juniper Rd

City Baltimore State MD Zip Code 21218

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1205.82

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : SA11AI.108553

Amount of Each Receipt this Period
 109.62

C. Andrew Brynes
Full Name (Last, First, Middle Initial)

Mailing Address 3919 Juniper Rd

City Baltimore State MD Zip Code 21218

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1315.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : SA11AI.108680

Amount of Each Receipt this Period
 109.62

SUBTOTAL of Receipts This Page (optional).....▶	328.86
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Andrew Brynes
 Full Name (Last, First, Middle Initial)
 Mailing Address 3919 Juniper Rd
 City Baltimore State MD Zip Code 21218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1425.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : SA11AI.108808
 Amount of Each Receipt this Period
 109.62

B. Samantha Bureau-Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 Hillsboro St
 City Pittsboro State NC Zip Code 27312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2014
Transaction ID : SA11AI.108011
 Amount of Each Receipt this Period
 75.00

C. Samantha Bureau-Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 Hillsboro St
 City Pittsboro State NC Zip Code 27312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2014
Transaction ID : SA11AI.108142
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional).....▶	259.62
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Samantha Bureau-Johnsonn
Full Name (Last, First, Middle Initial)
Mailing Address 300 Hillsboro St
City Pittsboro State NC Zip Code 27312
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 675.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2014
Transaction ID : SA11AI.108287
Amount of Each Receipt this Period
75.00

B. Samantha Bureau-Johnsonn
Full Name (Last, First, Middle Initial)
Mailing Address 300 Hillsboro St
City Pittsboro State NC Zip Code 27312
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2014
Transaction ID : SA11AI.108422
Amount of Each Receipt this Period
75.00

C. Samantha Bureau-Johnsonn
Full Name (Last, First, Middle Initial)
Mailing Address 300 Hillsboro St
City Pittsboro State NC Zip Code 27312
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 825.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014
Transaction ID : SA11AI.108554
Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Samantha Bureau-Johnsonn
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 Hillsboro St
 City Pittsboro State NC Zip Code 27312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : SA11AI.108681
 Amount of Each Receipt this Period
 75.00

B. Samantha Bureau-Johnsonn
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 Hillsboro St
 City Pittsboro State NC Zip Code 27312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : SA11AI.108809
 Amount of Each Receipt this Period
 75.00

C. L Lisa Cade
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 Ackworth Court
 City Cary State NC Zip Code 27519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 794.51

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2014
Transaction ID : SA11AI.108013
 Amount of Each Receipt this Period
 118.28

SUBTOTAL of Receipts This Page (optional).....▶	268.28
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. L Lisa Cade		Date of Receipt
Mailing Address 104 Ackworth Court		<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cary	NC	27519
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.108144
Name of Employer	Occupation	Amount of Each Receipt this Period
BCBSNC	VP	<input type="text" value="118.28"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="912.79"/>	

Full Name (Last, First, Middle Initial) B. L Lisa Cade		Date of Receipt
Mailing Address 104 Ackworth Court		<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cary	NC	27519
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.108289
Name of Employer	Occupation	Amount of Each Receipt this Period
BCBSNC	VP	<input type="text" value="118.28"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1031.07"/>	

Full Name (Last, First, Middle Initial) C. L Lisa Cade		Date of Receipt
Mailing Address 104 Ackworth Court		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cary	NC	27519
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.108424
Name of Employer	Occupation	Amount of Each Receipt this Period
BCBSNC	VP	<input type="text" value="118.28"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1149.35"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="354.84"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. L Lisa Cade		Date of Receipt
Mailing Address 104 Ackworth Court		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cary	NC	27519
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.108556
Name of Employer	Occupation	Amount of Each Receipt this Period
BCBSNC	VP	<input type="text" value="118.28"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1267.63"/>	

Full Name (Last, First, Middle Initial) B. L Lisa Cade		Date of Receipt
Mailing Address 104 Ackworth Court		<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cary	NC	27519
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.108683
Name of Employer	Occupation	Amount of Each Receipt this Period
BCBSNC	VP	<input type="text" value="118.28"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1385.91"/>	

Full Name (Last, First, Middle Initial) C. L Lisa Cade		Date of Receipt
Mailing Address 104 Ackworth Court		<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cary	NC	27519
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.108811
Name of Employer	Occupation	Amount of Each Receipt this Period
BCBSNC	VP	<input type="text" value="118.28"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1504.19"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="354.84"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 27 OF 150
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Steven Cherrier
 Full Name (Last, First, Middle Initial)
 Mailing Address 1207 Holly Creek Lane
 City State Zip Code
 Chapel Hill NC 27516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BCBSNC Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : SA11AI.108559
 Amount of Each Receipt this Period
 20.00

B. Steven Cherrier
 Full Name (Last, First, Middle Initial)
 Mailing Address 1207 Holly Creek Lane
 City State Zip Code
 Chapel Hill NC 27516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BCBSNC Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : SA11AI.108686
 Amount of Each Receipt this Period
 20.00

C. Steven Cherrier
 Full Name (Last, First, Middle Initial)
 Mailing Address 1207 Holly Creek Lane
 City State Zip Code
 Chapel Hill NC 27516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BCBSNC Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : SA11AI.108814
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

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

Mailing Address 301 Helmsdale Drive

City Chapel Hill State NC Zip Code 27517

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **538.44**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2014

Transaction ID : SA11Al.108019

Amount of Each Receipt this Period
78.57

B. Robert Cimo
Full Name (Last, First, Middle Initial)

Mailing Address 301 Helmsdale Drive

City Chapel Hill State NC Zip Code 27517

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **617.01**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11Al.108150

Amount of Each Receipt this Period
78.57

C. Robert Cimo
Full Name (Last, First, Middle Initial)

Mailing Address 301 Helmsdale Drive

City Chapel Hill State NC Zip Code 27517

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **695.58**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : SA11Al.108295

Amount of Each Receipt this Period
78.57

SUBTOTAL of Receipts This Page (optional).....▶	235.71
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

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

Mailing Address 301 Helmsdale Drive

City Chapel Hill State NC Zip Code 27517

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **774.15**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2014

Transaction ID : SA11AI.108430

Amount of Each Receipt this Period
78.57

B. Robert Cimo
Full Name (Last, First, Middle Initial)

Mailing Address 301 Helmsdale Drive

City Chapel Hill State NC Zip Code 27517

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **852.72**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : SA11AI.108562

Amount of Each Receipt this Period
78.57

C. Robert Cimo
Full Name (Last, First, Middle Initial)

Mailing Address 301 Helmsdale Drive

City Chapel Hill State NC Zip Code 27517

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **931.29**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2014

Transaction ID : SA11AI.108689

Amount of Each Receipt this Period
78.57

SUBTOTAL of Receipts This Page (optional)..... ▶ **235.71**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

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

Mailing Address 301 Helmsdale Drive

City Chapel Hill State NC Zip Code 27517

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1009.86

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : SA11AI.108817

Amount of Each Receipt this Period
 78.57

B. Ellison Clary
Full Name (Last, First, Middle Initial)

Mailing Address 415 North Church St Unit 113

City Charlotte State NC Zip Code 28202

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

Name of Employer BCBSNC Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
342.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2014
Transaction ID : SA11AI.108020

Amount of Each Receipt this Period
 49.91

C. Ellison Clary
Full Name (Last, First, Middle Initial)

Mailing Address 415 North Church St Unit 113

City Charlotte State NC Zip Code 28202

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

Name of Employer BCBSNC Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
392.03

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2014
Transaction ID : SA11AI.108151

Amount of Each Receipt this Period
 49.91

SUBTOTAL of Receipts This Page (optional)..... ▶ 178.39

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Ellison Clary		Date of Receipt
Mailing Address 415 North Church St Unit 113		<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City Charlotte	State NC	Zip Code 28202
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.108296
Name of Employer BCBSNC	Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="49.91"/>
	<input type="text" value="441.94"/>	

Full Name (Last, First, Middle Initial) B. Ellison Clary		Date of Receipt
Mailing Address 415 North Church St Unit 113		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City Charlotte	State NC	Zip Code 28202
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.108431
Name of Employer BCBSNC	Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="49.91"/>
	<input type="text" value="491.85"/>	

Full Name (Last, First, Middle Initial) C. Ellison Clary		Date of Receipt
Mailing Address 415 North Church St Unit 113		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City Charlotte	State NC	Zip Code 28202
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.108563
Name of Employer BCBSNC	Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="49.91"/>
	<input type="text" value="541.76"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="149.73"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Ellison Clary		Date of Receipt
Mailing Address 415 North Church St Unit 113		<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City Charlotte	State NC	Zip Code 28202
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.108690
Name of Employer BCBSNC		Occupation Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="49.91"/>
		<input type="text" value="591.67"/>

Full Name (Last, First, Middle Initial) B. Ellison Clary		Date of Receipt
Mailing Address 415 North Church St Unit 113		<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City Charlotte	State NC	Zip Code 28202
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.108818
Name of Employer BCBSNC		Occupation Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="49.91"/>
		<input type="text" value="641.58"/>

Full Name (Last, First, Middle Initial) C. K Steven Crist		Date of Receipt
Mailing Address 100 Chariot Court		<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City Cary	State NC	Zip Code 27519
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.108022
Name of Employer BCBSNC		Occupation VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="64.87"/>
		<input type="text" value="441.69"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="164.69"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. K Steven Crist
Full Name (Last, First, Middle Initial)
Mailing Address 100 Chariot Court

City Cary	State NC	Zip Code 27519
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **506.56**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2014

Transaction ID : SA11AI.108153

Amount of Each Receipt this Period

64.87

B. K Steven Crist
Full Name (Last, First, Middle Initial)
Mailing Address 100 Chariot Court

City Cary	State NC	Zip Code 27519
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FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **571.43**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2014

Transaction ID : SA11AI.108298

Amount of Each Receipt this Period

64.87

C. K Steven Crist
Full Name (Last, First, Middle Initial)
Mailing Address 100 Chariot Court

City Cary	State NC	Zip Code 27519
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **636.30**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2014

Transaction ID : SA11AI.108433

Amount of Each Receipt this Period

64.87

SUBTOTAL of Receipts This Page (optional).....▶	194.61
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. K Steven Crist			Date of Receipt
Mailing Address 100 Chariot Court			<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.108565
Cary	NC	27519	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="64.87"/>
Name of Employer	Occupation		
BCBSNC	VP		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="701.17"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. K Steven Crist			Date of Receipt
Mailing Address 100 Chariot Court			<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.108692
Cary	NC	27519	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="64.87"/>
Name of Employer	Occupation		
BCBSNC	VP		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="766.04"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. K Steven Crist			Date of Receipt
Mailing Address 100 Chariot Court			<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.108820
Cary	NC	27519	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="64.87"/>
Name of Employer	Occupation		
BCBSNC	VP		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="830.91"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="194.61"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Walter Davenport
Full Name (Last, First, Middle Initial)
Mailing Address 4929 Harbour Towne Dr
City Raleigh State NC Zip Code 27604
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Retired
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 13 / 2014**
Transaction ID : SA11AI.108927
Amount of Each Receipt this Period **250.00**
contribution

B. Walter Davenport
Full Name (Last, First, Middle Initial)
Mailing Address 4929 Harbour Towne Dr
City Raleigh State NC Zip Code 27604
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Retired
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **500.00**

Date of Receipt **06 / 13 / 2014**
Transaction ID : SA11AI.108928
Amount of Each Receipt this Period **250.00**
contribution

C. G Diane DeGross
Full Name (Last, First, Middle Initial)
Mailing Address 100 Cobart Ridge Rd
City Hillsborough State NC Zip Code 27278
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation BCBSNC Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **585.45**

Date of Receipt **04 / 04 / 2014**
Transaction ID : SA11AI.108027
Amount of Each Receipt this Period **86.00**
contribution

SUBTOTAL of Receipts This Page (optional)..... **586.00**
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. G Diane DeGroff
Full Name (Last, First, Middle Initial)

Mailing Address 100 Cobart Ridge Rd

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **671.45**

Date of Receipt
04 / 17 / 2014

Transaction ID : SA11AI.108158

Amount of Each Receipt this Period
86.00

B. G Diane DeGroff
Full Name (Last, First, Middle Initial)

Mailing Address 100 Cobart Ridge Rd

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **757.45**

Date of Receipt
05 / 02 / 2014

Transaction ID : SA11AI.108303

Amount of Each Receipt this Period
86.00

C. G Diane DeGroff
Full Name (Last, First, Middle Initial)

Mailing Address 100 Cobart Ridge Rd

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **843.45**

Date of Receipt
05 / 16 / 2014

Transaction ID : SA11AI.108438

Amount of Each Receipt this Period
86.00

SUBTOTAL of Receipts This Page (optional)..... **258.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. G Diane DeGroff
Full Name (Last, First, Middle Initial)

Mailing Address 100 Cobart Ridge Rd

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **929.45**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : SA11Al.108569

Amount of Each Receipt this Period
86.00

B. G Diane DeGroff
Full Name (Last, First, Middle Initial)

Mailing Address 100 Cobart Ridge Rd

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1015.45**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2014

Transaction ID : SA11Al.108697

Amount of Each Receipt this Period
86.00

C. G Diane DeGroff
Full Name (Last, First, Middle Initial)

Mailing Address 100 Cobart Ridge Rd

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1101.45**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014

Transaction ID : SA11Al.108823

Amount of Each Receipt this Period
86.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **258.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 OF 150
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Hugh Donohue
 Full Name (Last, First, Middle Initial)
 Mailing Address 102 Cabernet Circle
 City Cary State NC Zip Code 27511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 426.09

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2014
Transaction ID : SA11AI.108028
 Amount of Each Receipt this Period
 62.17

B. Hugh Donohue
 Full Name (Last, First, Middle Initial)
 Mailing Address 102 Cabernet Circle
 City Cary State NC Zip Code 27511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 488.26

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2014
Transaction ID : SA11AI.108159
 Amount of Each Receipt this Period
 62.17

C. Hugh Donohue
 Full Name (Last, First, Middle Initial)
 Mailing Address 102 Cabernet Circle
 City Cary State NC Zip Code 27511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.43

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2014
Transaction ID : SA11AI.108304
 Amount of Each Receipt this Period
 62.17

SUBTOTAL of Receipts This Page (optional)..... ▶ 186.51
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 39 OF 150
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial)
A. Hugh Donohue
 Mailing Address 102 Cabernet Circle
 City Cary State NC Zip Code 27511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 612.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2014
Transaction ID : SA11AI.108439
 Amount of Each Receipt this Period
 62.17

Full Name (Last, First, Middle Initial)
B. Hugh Donohue
 Mailing Address 102 Cabernet Circle
 City Cary State NC Zip Code 27511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 674.77

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : SA11AI.108570
 Amount of Each Receipt this Period
 62.17

Full Name (Last, First, Middle Initial)
C. Hugh Donohue
 Mailing Address 102 Cabernet Circle
 City Cary State NC Zip Code 27511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 736.94

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : SA11AI.108698
 Amount of Each Receipt this Period
 62.17

SUBTOTAL of Receipts This Page (optional)..... ▶ 186.51
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Hugh Donohue
Full Name (Last, First, Middle Initial)
Mailing Address 102 Cabernet Circle
City Cary State NC Zip Code 27511
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Medical Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 799.11

Date of Receipt
06 / 27 / 2014
Transaction ID : SA11AI.108824
Amount of Each Receipt this Period
62.17

B. Michelle Douglas
Full Name (Last, First, Middle Initial)
Mailing Address 1510 Canterbury Rd
City Raleigh State NC Zip Code 27608
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt
05 / 30 / 2014
Transaction ID : SA11AI.108572
Amount of Each Receipt this Period
20.00

c. Michelle Douglas
Full Name (Last, First, Middle Initial)
Mailing Address 1510 Canterbury Rd
City Raleigh State NC Zip Code 27608
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
06 / 13 / 2014
Transaction ID : SA11AI.108700
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 102.17
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Michelle Douglas
Full Name (Last, First, Middle Initial)
Mailing Address 1510 Canterbury Rd
City Raleigh State NC Zip Code 27608
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 27 / 2014
Transaction ID : SA11AI.108826
Amount of Each Receipt this Period
20.00

B. James Emmons
Full Name (Last, First, Middle Initial)
Mailing Address 105 Vyne Court
City Cary State NC Zip Code 27519
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 717.12

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 04 / 2014
Transaction ID : SA11AI.108033
Amount of Each Receipt this Period
110.00

C. James Emmons
Full Name (Last, First, Middle Initial)
Mailing Address 105 Vyne Court
City Cary State NC Zip Code 27519
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 827.12

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 17 / 2014
Transaction ID : SA11AI.108164
Amount of Each Receipt this Period
110.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 240.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. James Emmons
Full Name (Last, First, Middle Initial)
Mailing Address 105 Vyne Court

City Cary	State NC	Zip Code 27519
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **937.12**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2014

Transaction ID : SA11AI.108309

Amount of Each Receipt this Period

110.00

B. James Emmons
Full Name (Last, First, Middle Initial)
Mailing Address 105 Vyne Court

City Cary	State NC	Zip Code 27519
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1047.12**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2014

Transaction ID : SA11AI.108444

Amount of Each Receipt this Period

110.00

C. James Emmons
Full Name (Last, First, Middle Initial)
Mailing Address 105 Vyne Court

City Cary	State NC	Zip Code 27519
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1157.12**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

Transaction ID : SA11AI.108575

Amount of Each Receipt this Period

110.00

SUBTOTAL of Receipts This Page (optional).....▶	330.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. James Emmons
Full Name (Last, First, Middle Initial)
Mailing Address 105 Vyne Court
City Cary State NC Zip Code 27519
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1267.12

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2014
Transaction ID : SA11AI.108703
Amount of Each Receipt this Period
110.00

B. James Emmons
Full Name (Last, First, Middle Initial)
Mailing Address 105 Vyne Court
City Cary State NC Zip Code 27519
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1377.12

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014
Transaction ID : SA11AI.108829
Amount of Each Receipt this Period
110.00

C. A Christine Evans
Full Name (Last, First, Middle Initial)
Mailing Address 606 W. Aycock Street
City Raleigh State NC Zip Code 27608
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 288.74

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2014
Transaction ID : SA11AI.108035
Amount of Each Receipt this Period
42.12

SUBTOTAL of Receipts This Page (optional)..... ▶ 262.12
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. A Christine Evans
Full Name (Last, First, Middle Initial)
Mailing Address 606 W. Aycock Street
City Raleigh State NC Zip Code 27608
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.86

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2014
Transaction ID : SA11AI.108166
Amount of Each Receipt this Period
42.12

B. A Christine Evans
Full Name (Last, First, Middle Initial)
Mailing Address 606 W. Aycock Street
City Raleigh State NC Zip Code 27608
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 372.98

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2014
Transaction ID : SA11AI.108311
Amount of Each Receipt this Period
42.12

C. A Christine Evans
Full Name (Last, First, Middle Initial)
Mailing Address 606 W. Aycock Street
City Raleigh State NC Zip Code 27608
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 415.10

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2014
Transaction ID : SA11AI.108446
Amount of Each Receipt this Period
42.12

SUBTOTAL of Receipts This Page (optional)..... ▶ 126.36
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. A Christine Evans
Full Name (Last, First, Middle Initial)
Mailing Address 606 W. Aycock Street
City Raleigh State NC Zip Code 27608
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 457.22

Date of Receipt
MM / DD / YYYY
05 / 30 / 2014
Transaction ID : SA11AI.108577
Amount of Each Receipt this Period
42.12

B. A Christine Evans
Full Name (Last, First, Middle Initial)
Mailing Address 606 W. Aycock Street
City Raleigh State NC Zip Code 27608
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 499.34

Date of Receipt
MM / DD / YYYY
06 / 13 / 2014
Transaction ID : SA11AI.108705
Amount of Each Receipt this Period
42.12

C. A Christine Evans
Full Name (Last, First, Middle Initial)
Mailing Address 606 W. Aycock Street
City Raleigh State NC Zip Code 27608
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 541.46

Date of Receipt
MM / DD / YYYY
06 / 27 / 2014
Transaction ID : SA11AI.108831
Amount of Each Receipt this Period
42.12

SUBTOTAL of Receipts This Page (optional)..... ▶ 126.36
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. M Robert Fleming
Full Name (Last, First, Middle Initial)
Mailing Address 211 St. Mary's Street
City Raleigh State NC Zip Code 27605
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 436.33

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2014
Transaction ID : SA11Al.108036
Amount of Each Receipt this Period
64.90

B. M Robert Fleming
Full Name (Last, First, Middle Initial)
Mailing Address 211 St. Mary's Street
City Raleigh State NC Zip Code 27605
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 501.23

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2014
Transaction ID : SA11Al.108167
Amount of Each Receipt this Period
64.90

C. M Robert Fleming
Full Name (Last, First, Middle Initial)
Mailing Address 211 St. Mary's Street
City Raleigh State NC Zip Code 27605
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 566.13

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2014
Transaction ID : SA11Al.108312
Amount of Each Receipt this Period
64.90

SUBTOTAL of Receipts This Page (optional)..... ▶ 194.70
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. M Robert Fleming
Full Name (Last, First, Middle Initial)
Mailing Address 211 St. Mary's Street
City Raleigh State NC Zip Code 27605
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 631.03

Date of Receipt
05 / 16 / 2014
Transaction ID : SA11Al.108447
Amount of Each Receipt this Period
64.90

B. M Robert Fleming
Full Name (Last, First, Middle Initial)
Mailing Address 211 St. Mary's Street
City Raleigh State NC Zip Code 27605
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 695.93

Date of Receipt
05 / 30 / 2014
Transaction ID : SA11Al.108578
Amount of Each Receipt this Period
64.90

C. M Robert Fleming
Full Name (Last, First, Middle Initial)
Mailing Address 211 St. Mary's Street
City Raleigh State NC Zip Code 27605
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 760.83

Date of Receipt
06 / 13 / 2014
Transaction ID : SA11Al.108706
Amount of Each Receipt this Period
64.90

SUBTOTAL of Receipts This Page (optional)..... ▶ 194.70
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. M Robert Fleming
Full Name (Last, First, Middle Initial)
Mailing Address 211 St. Mary's Street
City Raleigh State NC Zip Code 27605
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **825.73**

Date of Receipt **06 / 27 / 2014**
Transaction ID : SA11AI.108832
Amount of Each Receipt this Period **64.90**

B. John Fong
Full Name (Last, First, Middle Initial)
Mailing Address 41 Lintel Dr
City McMurry State PA Zip Code 15317
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **781.38**

Date of Receipt **04 / 04 / 2014**
Transaction ID : SA11AI.108038
Amount of Each Receipt this Period **113.69**

C. John Fong
Full Name (Last, First, Middle Initial)
Mailing Address 41 Lintel Dr
City McMurry State PA Zip Code 15317
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **895.07**

Date of Receipt **04 / 17 / 2014**
Transaction ID : SA11AI.108169
Amount of Each Receipt this Period **113.69**

SUBTOTAL of Receipts This Page (optional)..... **292.28**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial)
A. John Fong

Mailing Address 41 Lintel Dr

City McMurry State PA Zip Code 15317

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1008.76**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : SA11AI.108314

Amount of Each Receipt this Period
113.69

Full Name (Last, First, Middle Initial)
B. John Fong

Mailing Address 41 Lintel Dr

City McMurry State PA Zip Code 15317

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1122.45**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2014

Transaction ID : SA11AI.108449

Amount of Each Receipt this Period
113.69

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

Mailing Address 41 Lintel Dr

City McMurry State PA Zip Code 15317

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1236.14**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : SA11AI.108580

Amount of Each Receipt this Period
113.69

SUBTOTAL of Receipts This Page (optional)..... ▶ **341.07**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. John Fong		Date of Receipt MM / DD / YYYY 06 / 13 / 2014 Transaction ID : SA11AI.108708
Mailing Address 41 Lintel Dr		Amount of Each Receipt this Period 113.69
City McMurry	State PA	Zip Code 15317
FEC ID number of contributing federal political committee.	C	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1349.83	

Full Name (Last, First, Middle Initial) B. John Fong		Date of Receipt MM / DD / YYYY 06 / 27 / 2014 Transaction ID : SA11AI.108834
Mailing Address 41 Lintel Dr		Amount of Each Receipt this Period 113.69
City McMurry	State PA	Zip Code 15317
FEC ID number of contributing federal political committee.	C	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1463.52	

Full Name (Last, First, Middle Initial) C. Kathi Gaines		Date of Receipt MM / DD / YYYY 04 / 04 / 2014 Transaction ID : SA11AI.108039
Mailing Address 603 Kingswood Drive		Amount of Each Receipt this Period 50.51
City Cary	State NC	Zip Code 27513
FEC ID number of contributing federal political committee.	C	
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 353.57	

SUBTOTAL of Receipts This Page (optional).....▶	277.89
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Kathi Gaines
Full Name (Last, First, Middle Initial)
Mailing Address 603 Kingswood Drive

City Cary	State NC	Zip Code 27513
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Director
----------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
404.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2014

Transaction ID : SA11AI.108170

Amount of Each Receipt this Period
50.51

B. Kathi Gaines
Full Name (Last, First, Middle Initial)
Mailing Address 603 Kingswood Drive

City Cary	State NC	Zip Code 27513
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Director
----------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
454.59

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2014

Transaction ID : SA11AI.108315

Amount of Each Receipt this Period
50.51

C. Kathi Gaines
Full Name (Last, First, Middle Initial)
Mailing Address 603 Kingswood Drive

City Cary	State NC	Zip Code 27513
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Director
----------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2014

Transaction ID : SA11AI.108450

Amount of Each Receipt this Period
50.51

SUBTOTAL of Receipts This Page (optional).....▶	151.53
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Kathi Gaines
Full Name (Last, First, Middle Initial)
Mailing Address 603 Kingswood Drive

City Cary	State NC	Zip Code 27513
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Director
----------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
555.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

Transaction ID : SA11AI.108581

Amount of Each Receipt this Period
50.51

B. Kathi Gaines
Full Name (Last, First, Middle Initial)
Mailing Address 603 Kingswood Drive

City Cary	State NC	Zip Code 27513
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Director
----------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
606.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2014

Transaction ID : SA11AI.108709

Amount of Each Receipt this Period
50.51

C. Kathi Gaines
Full Name (Last, First, Middle Initial)
Mailing Address 603 Kingswood Drive

City Cary	State NC	Zip Code 27513
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Director
----------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
656.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2014

Transaction ID : SA11AI.108835

Amount of Each Receipt this Period
50.51

SUBTOTAL of Receipts This Page (optional).....▶	151.53
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Katrina Gesh-Wilson
Full Name (Last, First, Middle Initial)

Mailing Address 2110 S. Pecan Trail Drive

City Richmond	State TX	Zip Code 77406
------------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **631.91**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04	/	04	/	2014

Transaction ID : SA11Al.108040

Amount of Each Receipt this Period

80.00

B. Katrina Gesh-Wilson
Full Name (Last, First, Middle Initial)

Mailing Address 2110 S. Pecan Trail Drive

City Richmond	State TX	Zip Code 77406
------------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **731.91**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04	/	17	/	2014

Transaction ID : SA11Al.108171

Amount of Each Receipt this Period

100.00

C. Katrina Gesh-Wilson
Full Name (Last, First, Middle Initial)

Mailing Address 2110 S. Pecan Trail Drive

City Richmond	State TX	Zip Code 77406
------------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **831.91**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05	/	02	/	2014

Transaction ID : SA11Al.108316

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....▶	280.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Katrina Gesh-Wilson		Date of Receipt
Mailing Address 2110 S. Pecan Trail Drive		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City Richmond State TX Zip Code 77406		Transaction ID : SA11Al.108451
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="931.91"/>	

Full Name (Last, First, Middle Initial) B. Katrina Gesh-Wilson		Date of Receipt
Mailing Address 2110 S. Pecan Trail Drive		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City Richmond State TX Zip Code 77406		Transaction ID : SA11Al.108582
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1031.91"/>	

Full Name (Last, First, Middle Initial) C. Katrina Gesh-Wilson		Date of Receipt
Mailing Address 2110 S. Pecan Trail Drive		<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City Richmond State TX Zip Code 77406		Transaction ID : SA11Al.108710
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1131.91"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Katrina Gesh-Wilson
Full Name (Last, First, Middle Initial)

Mailing Address 2110 S. Pecan Trail Drive

City Richmond	State TX	Zip Code 77406
------------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1231.91

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06	/	27	/	2014

Transaction ID : SA11AI.108836

Amount of Each Receipt this Period
100.00

B. K Patrick Getzen
Full Name (Last, First, Middle Initial)

Mailing Address 205 Chilcott

City Apex	State NC	Zip Code 27502
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
991.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04	/	04	/	2014

Transaction ID : SA11AI.108041

Amount of Each Receipt this Period
145.60

C. K Patrick Getzen
Full Name (Last, First, Middle Initial)

Mailing Address 205 Chilcott

City Apex	State NC	Zip Code 27502
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1136.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04	/	17	/	2014

Transaction ID : SA11AI.108172

Amount of Each Receipt this Period
145.60

SUBTOTAL of Receipts This Page (optional).....▶	391.20
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. K Patrick Getzen
Full Name (Last, First, Middle Initial)
Mailing Address 205 Chilcott
City Apex State NC Zip Code 27502
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1282.40**

Date of Receipt **05 / 02 / 2014**
Transaction ID : SA11AI.108317
Amount of Each Receipt this Period **145.60**

B. K Patrick Getzen
Full Name (Last, First, Middle Initial)
Mailing Address 205 Chilcott
City Apex State NC Zip Code 27502
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1428.00**

Date of Receipt **05 / 16 / 2014**
Transaction ID : SA11AI.108452
Amount of Each Receipt this Period **145.60**

C. K Patrick Getzen
Full Name (Last, First, Middle Initial)
Mailing Address 205 Chilcott
City Apex State NC Zip Code 27502
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1573.60**

Date of Receipt **05 / 30 / 2014**
Transaction ID : SA11AI.108583
Amount of Each Receipt this Period **145.60**

SUBTOTAL of Receipts This Page (optional)..... **436.80**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 150
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. K Patrick Getzen
 Full Name (Last, First, Middle Initial)
 Mailing Address 205 Chilcott
 City Apex State NC Zip Code 27502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1719.20

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : SA11Al.108711
 Amount of Each Receipt this Period
 145.60

B. K Patrick Getzen
 Full Name (Last, First, Middle Initial)
 Mailing Address 205 Chilcott
 City Apex State NC Zip Code 27502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1864.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : SA11Al.108837
 Amount of Each Receipt this Period
 145.60

C. Laura Gorry
 Full Name (Last, First, Middle Initial)
 Mailing Address 2566 Ironwood Drive
 City Hickory State NC Zip Code 28602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Regional Service Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.72

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2014
Transaction ID : SA11Al.108042
 Amount of Each Receipt this Period
 50.26

SUBTOTAL of Receipts This Page (optional).....▶	341.46
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Laura Gorry
Full Name (Last, First, Middle Initial)

Mailing Address 2566 Ironwood Drive

City Hickory State NC Zip Code 28602

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

Name of Employer BCBSNC Occupation Regional Service Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **395.98**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11AI.108173

Amount of Each Receipt this Period
50.26

B. Laura Gorry
Full Name (Last, First, Middle Initial)

Mailing Address 2566 Ironwood Drive

City Hickory State NC Zip Code 28602

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

Name of Employer BCBSNC Occupation Regional Service Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **446.24**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : SA11AI.108318

Amount of Each Receipt this Period
50.26

C. Laura Gorry
Full Name (Last, First, Middle Initial)

Mailing Address 2566 Ironwood Drive

City Hickory State NC Zip Code 28602

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

Name of Employer BCBSNC Occupation Regional Service Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **496.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2014

Transaction ID : SA11AI.108453

Amount of Each Receipt this Period
50.26

SUBTOTAL of Receipts This Page (optional)..... ▶ **150.78**

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

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

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

FOR LINE NUMBER: PAGE 59 OF 150
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Laura Gorry
 Full Name (Last, First, Middle Initial)
 Mailing Address 2566 Ironwood Drive
 City State Zip Code
 Hickory NC 28602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BCBSNC Regional Service Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 546.76

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : SA11AI.108584
 Amount of Each Receipt this Period
 50.26

B. Laura Gorry
 Full Name (Last, First, Middle Initial)
 Mailing Address 2566 Ironwood Drive
 City State Zip Code
 Hickory NC 28602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BCBSNC Regional Service Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 597.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : SA11AI.108712
 Amount of Each Receipt this Period
 50.26

C. Laura Gorry
 Full Name (Last, First, Middle Initial)
 Mailing Address 2566 Ironwood Drive
 City State Zip Code
 Hickory NC 28602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BCBSNC Regional Service Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 647.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : SA11AI.108838
 Amount of Each Receipt this Period
 50.26

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.78
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Estay Green
Full Name (Last, First, Middle Initial)
Mailing Address 1004 Fullbright Dr
City Morrisville State NC Zip Code 27560
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014
Transaction ID : SA11AI.108585
Amount of Each Receipt this Period
20.00

B. Estay Green
Full Name (Last, First, Middle Initial)
Mailing Address 1004 Fullbright Dr
City Morrisville State NC Zip Code 27560
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2014
Transaction ID : SA11AI.108713
Amount of Each Receipt this Period
20.00

C. Estay Green
Full Name (Last, First, Middle Initial)
Mailing Address 1004 Fullbright Dr
City Morrisville State NC Zip Code 27560
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014
Transaction ID : SA11AI.108839
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Mr. Darrell Grissom II
Full Name (Last, First, Middle Initial)

Mailing Address 1105 New Hampshire Drive

City State Zip Code
Jamestown NC 27282

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

Name of Employer Occupation
BCBSNC Consumer Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.72

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 13 / 2014
Transaction ID : SA11AI.108714

Amount of Each Receipt this Period
17.31

B. Mr. Darrell Grissom II
Full Name (Last, First, Middle Initial)

Mailing Address 1105 New Hampshire Drive

City State Zip Code
Jamestown NC 27282

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

Name of Employer Occupation
BCBSNC Consumer Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.03

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 27 / 2014
Transaction ID : SA11AI.108840

Amount of Each Receipt this Period
17.31

C. Latisha Hamilton-Williams
Full Name (Last, First, Middle Initial)

Mailing Address 546 Heswan Court

City State Zip Code
Roseville NC 27571

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

Name of Employer Occupation
BCBSNC VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
567.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 04 / 2014
Transaction ID : SA11AI.108045

Amount of Each Receipt this Period
81.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.62

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Latisha Hamilton-Williams
Full Name (Last, First, Middle Initial)
Mailing Address 546 Heswan Court

City Roseville	State NC	Zip Code 27571
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 648.00	

Date of Receipt
04 / 17 / 2014
Transaction ID : SA11Al.108176

Amount of Each Receipt this Period
81.00

B. Latisha Hamilton-Williams
Full Name (Last, First, Middle Initial)
Mailing Address 546 Heswan Court

City Roseville	State NC	Zip Code 27571
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 729.00	

Date of Receipt
05 / 02 / 2014
Transaction ID : SA11Al.108321

Amount of Each Receipt this Period
81.00

C. Latisha Hamilton-Williams
Full Name (Last, First, Middle Initial)
Mailing Address 546 Heswan Court

City Roseville	State NC	Zip Code 27571
FEC ID number of contributing federal political committee. C		
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 810.00	

Date of Receipt
05 / 16 / 2014
Transaction ID : SA11Al.108456

Amount of Each Receipt this Period
81.00

SUBTOTAL of Receipts This Page (optional).....▶	243.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Latisha Hamilton-Williams		Date of Receipt
Mailing Address 546 Heswan Court		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City Roseville	State NC	Zip Code 27571
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.108587
Name of Employer BCBSNC		Occupation VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="81.00"/>
		<input type="text" value="891.00"/>

Full Name (Last, First, Middle Initial) B. Latisha Hamilton-Williams		Date of Receipt
Mailing Address 546 Heswan Court		<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City Roseville	State NC	Zip Code 27571
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.108715
Name of Employer BCBSNC		Occupation VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="81.00"/>
		<input type="text" value="972.00"/>

Full Name (Last, First, Middle Initial) C. Latisha Hamilton-Williams		Date of Receipt
Mailing Address 546 Heswan Court		<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City Roseville	State NC	Zip Code 27571
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.108841
Name of Employer BCBSNC		Occupation VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="81.00"/>
		<input type="text" value="1053.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="243.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Patricia Hatfield
Full Name (Last, First, Middle Initial)
Mailing Address 102 Oak Spring Court
City Carrboro State NC Zip Code 27510
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Assoc. General Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 525.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 04 / 2014
Transaction ID : SA11AI.108046
Amount of Each Receipt this Period
75.00

B. Patricia Hatfield
Full Name (Last, First, Middle Initial)
Mailing Address 102 Oak Spring Court
City Carrboro State NC Zip Code 27510
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Assoc. General Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 17 / 2014
Transaction ID : SA11AI.108177
Amount of Each Receipt this Period
75.00

C. Patricia Hatfield
Full Name (Last, First, Middle Initial)
Mailing Address 102 Oak Spring Court
City Carrboro State NC Zip Code 27510
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Assoc. General Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 675.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 02 / 2014
Transaction ID : SA11AI.108322
Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Patricia Hatfield
Full Name (Last, First, Middle Initial)

Mailing Address 102 Oak Spring Court

City Carrboro State NC Zip Code 27510

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

Name of Employer BCBSNC Occupation Assoc. General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2014

Transaction ID : SA11AI.108457

Amount of Each Receipt this Period
75.00

B. M Karen Hausser
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **212.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2014

Transaction ID : SA11AI.108048

Amount of Each Receipt this Period
36.18

C. M Karen Hausser
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **249.06**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11AI.108179

Amount of Each Receipt this Period
36.18

SUBTOTAL of Receipts This Page (optional).....▶	147.36
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. M Karen Hausser
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.24**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : SA11AI.108324

Amount of Each Receipt this Period
36.18

B. M Karen Hausser
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **321.42**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2014

Transaction ID : SA11AI.108459

Amount of Each Receipt this Period
36.18

C. M Karen Hausser
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **357.60**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : SA11AI.108589

Amount of Each Receipt this Period
36.18

SUBTOTAL of Receipts This Page (optional).....▶	108.54
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 67 OF 150
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial)
A. M Karen Hausser

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **393.78**

Date of Receipt
06 / 13 / 2014
Transaction ID : SA11AI.108717

Amount of Each Receipt this Period
36.18

Full Name (Last, First, Middle Initial)
B. M Karen Hausser

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **429.96**

Date of Receipt
06 / 27 / 2014
Transaction ID : SA11AI.108843

Amount of Each Receipt this Period
36.18

Full Name (Last, First, Middle Initial)
C. Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City State Zip Code
 Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **763.53**

Date of Receipt
04 / 04 / 2014
Transaction ID : SA11AI.108049

Amount of Each Receipt this Period
112.54

SUBTOTAL of Receipts This Page (optional)..... ▶ **184.90**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Ms Susan Helm-Murtagh			Date of Receipt
Mailing Address 117 Oldham Place			<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.108180
Chapel Hill	NC	27516	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="112.54"/>
Name of Employer	Occupation		
BCBSNC	Resource Director		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="876.07"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms Susan Helm-Murtagh			Date of Receipt
Mailing Address 117 Oldham Place			<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.108325
Chapel Hill	NC	27516	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="112.54"/>
Name of Employer	Occupation		
BCBSNC	Resource Director		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="988.61"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms Susan Helm-Murtagh			Date of Receipt
Mailing Address 117 Oldham Place			<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.108460
Chapel Hill	NC	27516	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="78.78"/>
Name of Employer	Occupation		
BCBSNC	Resource Director		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1067.39"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="303.86"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Ms Susan Helm-Murtagh
Full Name (Last, First, Middle Initial)

Mailing Address 117 Oldham Place

City Chapel Hill State NC Zip Code 27516

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

Name of Employer BCBSNC Occupation Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1179.93**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : SA11Al.108590

Amount of Each Receipt this Period
112.54

B. Ms Susan Helm-Murtagh
Full Name (Last, First, Middle Initial)

Mailing Address 117 Oldham Place

City Chapel Hill State NC Zip Code 27516

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

Name of Employer BCBSNC Occupation Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1292.47**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2014

Transaction ID : SA11Al.108718

Amount of Each Receipt this Period
112.54

C. Ms Susan Helm-Murtagh
Full Name (Last, First, Middle Initial)

Mailing Address 117 Oldham Place

City Chapel Hill State NC Zip Code 27516

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

Name of Employer BCBSNC Occupation Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1405.01**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014

Transaction ID : SA11Al.108844

Amount of Each Receipt this Period
112.54

SUBTOTAL of Receipts This Page (optional)..... ▶ **337.62**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Ms Kathryn Higgins
Full Name (Last, First, Middle Initial)
Mailing Address 734 Crabtree Crossing
City Cary State NC Zip Code 27513
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Sr. Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 273.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 04 / 2014
Transaction ID : SA11AI.108051
Amount of Each Receipt this Period
39.00

B. Ms Kathryn Higgins
Full Name (Last, First, Middle Initial)
Mailing Address 734 Crabtree Crossing
City Cary State NC Zip Code 27513
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Sr. Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 312.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 17 / 2014
Transaction ID : SA11AI.108182
Amount of Each Receipt this Period
39.00

C. Ms Kathryn Higgins
Full Name (Last, First, Middle Initial)
Mailing Address 734 Crabtree Crossing
City Cary State NC Zip Code 27513
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Sr. Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 351.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 02 / 2014
Transaction ID : SA11AI.108327
Amount of Each Receipt this Period
39.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 117.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Ms Kathryn Higgins
Full Name (Last, First, Middle Initial)
Mailing Address 734 Crabtree Crossing
City Cary State NC Zip Code 27513
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Sr. Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2014
Transaction ID : SA11AI.108462
Amount of Each Receipt this Period
390.00

B. Ms Kathryn Higgins
Full Name (Last, First, Middle Initial)
Mailing Address 734 Crabtree Crossing
City Cary State NC Zip Code 27513
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Sr. Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 429.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2014
Transaction ID : SA11AI.108591
Amount of Each Receipt this Period
390.00

C. Ms Kathryn Higgins
Full Name (Last, First, Middle Initial)
Mailing Address 734 Crabtree Crossing
City Cary State NC Zip Code 27513
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Sr. Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 468.00

Date of Receipt
MM / DD / YYYY
06 / 13 / 2014
Transaction ID : SA11AI.108719
Amount of Each Receipt this Period
390.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 117.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 150
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial)
A. Ms Kathryn Higgins

Mailing Address 734 Crabtree Crossing

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Sr. Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **507.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014

Transaction ID : SA11AI.108845

Amount of Each Receipt this Period
39.00

Full Name (Last, First, Middle Initial)
B. Frank Holding

Mailing Address PO Box 29549

City Raleigh State NC Zip Code 27604

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

Name of Employer Occupation CEO First Citizens

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **416.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 13 / 2014

Transaction ID : SA11AI.108929

Amount of Each Receipt this Period
416.00

contribution

Full Name (Last, First, Middle Initial)
C. Frank Holding

Mailing Address PO Box 29549

City Raleigh State NC Zip Code 27604

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

Name of Employer Occupation CEO First Citizens

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **832.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2014

Transaction ID : SA11AI.108930

Amount of Each Receipt this Period
416.00

contribution

SUBTOTAL of Receipts This Page (optional).....▶	871.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. E William Hotchkiss
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer: BCBSNC
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
05 / 02 / 2014

Transaction ID : SA11AI.108329

Amount of Each Receipt this Period
25.00

B. E William Hotchkiss
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer: BCBSNC
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
05 / 16 / 2014

Transaction ID : SA11AI.108464

Amount of Each Receipt this Period
25.00

C. E William Hotchkiss
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer: BCBSNC
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt
05 / 30 / 2014

Transaction ID : SA11AI.108593

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. E William Hotchkiss		Date of Receipt
Mailing Address		<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City State Zip Code		Transaction ID : SA11AI.108721
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer BCBSNC Occupation Director		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. E William Hotchkiss		Date of Receipt
Mailing Address		<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City State Zip Code		Transaction ID : SA11AI.108847
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer BCBSNC Occupation Director		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="325.00"/>	

Full Name (Last, First, Middle Initial) C. Alan Hughes		Date of Receipt
Mailing Address 3604 Nightfall Ct		<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City Raleigh State NC Zip Code 27607		Transaction ID : SA11AI.108055
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer BCBSNC Occupation SVP		<input type="text" value="186.54"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="1267.33"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="236.54"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Alan Hughes
Full Name (Last, First, Middle Initial)
Mailing Address 3604 Nightfall Ct
City Raleigh State NC Zip Code 27607
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation SVP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1453.87

Date of Receipt
MM / DD / YYYY
04 / 17 / 2014
Transaction ID : SA11Al.108186
Amount of Each Receipt this Period
186.54

B. Alan Hughes
Full Name (Last, First, Middle Initial)
Mailing Address 3604 Nightfall Ct
City Raleigh State NC Zip Code 27607
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation SVP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1640.41

Date of Receipt
MM / DD / YYYY
05 / 02 / 2014
Transaction ID : SA11Al.108331
Amount of Each Receipt this Period
186.54

C. Alan Hughes
Full Name (Last, First, Middle Initial)
Mailing Address 3604 Nightfall Ct
City Raleigh State NC Zip Code 27607
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation SVP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1826.95

Date of Receipt
MM / DD / YYYY
05 / 16 / 2014
Transaction ID : SA11Al.108466
Amount of Each Receipt this Period
186.54

SUBTOTAL of Receipts This Page (optional)..... ▶ 559.62
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Alan Hughes
Full Name (Last, First, Middle Initial)
Mailing Address 3604 Nightfall Ct
City Raleigh State NC Zip Code 27607
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation SVP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2013.49

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014
Transaction ID : SA11Al.108595
Amount of Each Receipt this Period
186.54

B. Alan Hughes
Full Name (Last, First, Middle Initial)
Mailing Address 3604 Nightfall Ct
City Raleigh State NC Zip Code 27607
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation SVP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2200.03

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2014
Transaction ID : SA11Al.108723
Amount of Each Receipt this Period
186.54

C. Alan Hughes
Full Name (Last, First, Middle Initial)
Mailing Address 3604 Nightfall Ct
City Raleigh State NC Zip Code 27607
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation SVP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2386.57

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014
Transaction ID : SA11Al.108849
Amount of Each Receipt this Period
186.54

SUBTOTAL of Receipts This Page (optional).....▶	559.62
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Stanley Jenkins
Full Name (Last, First, Middle Initial)

Mailing Address 5436 Chimney Swift Dr

City Wake Forest State NC Zip Code 27587

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

Name of Employer BCBSNC Occupation Enterprise Architech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **258.15**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2014

Transaction ID : SA11Al.108056

Amount of Each Receipt this Period
42.83

B. Stanley Jenkins
Full Name (Last, First, Middle Initial)

Mailing Address 5436 Chimney Swift Dr

City Wake Forest State NC Zip Code 27587

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

Name of Employer BCBSNC Occupation Enterprise Architech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **298.08**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11Al.108187

Amount of Each Receipt this Period
39.93

C. Stanley Jenkins
Full Name (Last, First, Middle Initial)

Mailing Address 5436 Chimney Swift Dr

City Wake Forest State NC Zip Code 27587

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

Name of Employer BCBSNC Occupation Enterprise Architech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **334.13**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : SA11Al.108332

Amount of Each Receipt this Period
36.05

SUBTOTAL of Receipts This Page (optional).....▶	118.81
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Stanley Jenkins		Date of Receipt
Mailing Address 5436 Chimney Swift Dr		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
Wake Forest	NC	27587
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.108467
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="39.93"/>
Name of Employer	Occupation	
BCBSNC	Enterprise Architech	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="374.06"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Stanley Jenkins		Date of Receipt
Mailing Address 5436 Chimney Swift Dr		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Wake Forest	NC	27587
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.108596
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="39.93"/>
Name of Employer	Occupation	
BCBSNC	Enterprise Architech	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="413.99"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Stanley Jenkins		Date of Receipt
Mailing Address 5436 Chimney Swift Dr		<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City	State	Zip Code
Wake Forest	NC	27587
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.108724
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="39.93"/>
Name of Employer	Occupation	
BCBSNC	Enterprise Architech	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="453.92"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="119.79"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Stanley Jenkins
Full Name (Last, First, Middle Initial)
Mailing Address 5436 Chimney Swift Dr
City Wake Forest State NC Zip Code 27587
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Enterprise Architech
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 493.85

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014
Transaction ID : SA11AI.108850
Amount of Each Receipt this Period
93.93

B. Mr. James Kenley Sr.
Full Name (Last, First, Middle Initial)
Mailing Address 4670 Elmhurst Drive NE
City Hickory State NC Zip Code 28601
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 642.01

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2014
Transaction ID : SA11AI.108059
Amount of Each Receipt this Period
93.92

C. Mr. James Kenley Sr.
Full Name (Last, First, Middle Initial)
Mailing Address 4670 Elmhurst Drive NE
City Hickory State NC Zip Code 28601
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 735.93

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2014
Transaction ID : SA11AI.108190
Amount of Each Receipt this Period
93.92

SUBTOTAL of Receipts This Page (optional)..... ▶ 227.77
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 80 OF 150
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Mr. James Kenley Sr.
Full Name (Last, First, Middle Initial)

Mailing Address 4670 Elmhurst Drive NE

City Hickory	State NC	Zip Code 28601
-----------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **829.85**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05	/	02	/	2014

Transaction ID : SA11AI.108335

Amount of Each Receipt this Period

93.92

B. Mr. James Kenley Sr.
Full Name (Last, First, Middle Initial)

Mailing Address 4670 Elmhurst Drive NE

City Hickory	State NC	Zip Code 28601
-----------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **923.77**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05	/	16	/	2014

Transaction ID : SA11AI.108470

Amount of Each Receipt this Period

93.92

C. Mr. James Kenley Sr.
Full Name (Last, First, Middle Initial)

Mailing Address 4670 Elmhurst Drive NE

City Hickory	State NC	Zip Code 28601
-----------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1017.69**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05	/	30	/	2014

Transaction ID : SA11AI.108599

Amount of Each Receipt this Period

93.92

SUBTOTAL of Receipts This Page (optional).....▶	281.76
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 81 OF 150
(check only one)
 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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Mr. James Kenley Sr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 4670 Elmhurst Drive NE
 City State Zip Code
 Hickory NC 28601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BCBSNC VP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1111.61

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : SA11AI.108727
 Amount of Each Receipt this Period
 93.92

B. Mr. James Kenley Sr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 4670 Elmhurst Drive NE
 City State Zip Code
 Hickory NC 28601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BCBSNC VP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1205.53

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : SA11AI.108853
 Amount of Each Receipt this Period
 93.92

C. Sean Kerns
 Full Name (Last, First, Middle Initial)
 Mailing Address 106 Caymus Ct
 City State Zip Code
 Cary NC 27519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BCBSNC VP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2014
Transaction ID : SA11AI.108060
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 227.84
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial)
A. Sean Kerns

Mailing Address 106 Caymus Ct

City Cary	State NC	Zip Code 27519
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2014

Transaction ID : SA11AI.108191

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)
B. Sean Kerns

Mailing Address 106 Caymus Ct

City Cary	State NC	Zip Code 27519
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2014

Transaction ID : SA11AI.108336

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)
C. Sean Kerns

Mailing Address 106 Caymus Ct

City Cary	State NC	Zip Code 27519
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2014

Transaction ID : SA11AI.108471

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 83 OF 150
(check only one)
 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 Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial)
A. Sean Kerns

Mailing Address 106 Caymus Ct

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : SA11AI.108600

Amount of Each Receipt this Period
40.00

Full Name (Last, First, Middle Initial)
B. Sean Kerns

Mailing Address 106 Caymus Ct

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2014

Transaction ID : SA11AI.108728

Amount of Each Receipt this Period
40.00

Full Name (Last, First, Middle Initial)
C. Sean Kerns

Mailing Address 106 Caymus Ct

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014

Transaction ID : SA11AI.108854

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **120.00**

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

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

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

FOR LINE NUMBER: PAGE 84 OF 150
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. William Lawrence
 Full Name (Last, First, Middle Initial)
 Mailing Address 2300 Baileys Landing Drive
 City Raleigh State NC Zip Code 27606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : SA11AI.108602
 Amount of Each Receipt this Period
 20.00

B. William Lawrence
 Full Name (Last, First, Middle Initial)
 Mailing Address 2300 Baileys Landing Drive
 City Raleigh State NC Zip Code 27606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : SA11AI.108730
 Amount of Each Receipt this Period
 20.00

C. William Lawrence
 Full Name (Last, First, Middle Initial)
 Mailing Address 2300 Baileys Landing Drive
 City Raleigh State NC Zip Code 27606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : SA11AI.108856
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Adrienna Maisonet-Morales
Full Name (Last, First, Middle Initial)

Mailing Address 100 Village Circle Way #1201

City Durham State NC Zip Code 27713

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : SA11AI.108605

Amount of Each Receipt this Period
 20.00

B. Adrienna Maisonet-Morales
Full Name (Last, First, Middle Initial)

Mailing Address 100 Village Circle Way #1201

City Durham State NC Zip Code 27713

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : SA11AI.108733

Amount of Each Receipt this Period
 20.00

C. Adrienna Maisonet-Morales
Full Name (Last, First, Middle Initial)

Mailing Address 100 Village Circle Way #1201

City Durham State NC Zip Code 27713

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : SA11AI.108859

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. C Ralph Mazza		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 04 / 2014 Transaction ID : SA11AI.108067
Mailing Address 938 Alden Bridge		Amount of Each Receipt this Period 47.36
City Cary	State NC	Zip Code 27519
FEC ID number of contributing federal political committee. C	Name of Employer BCBSNC	Occupation Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.77	

Full Name (Last, First, Middle Initial) B. C Ralph Mazza		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 17 / 2014 Transaction ID : SA11AI.108198
Mailing Address 938 Alden Bridge		Amount of Each Receipt this Period 47.36
City Cary	State NC	Zip Code 27519
FEC ID number of contributing federal political committee. C	Name of Employer BCBSNC	Occupation Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 373.13	

Full Name (Last, First, Middle Initial) C. C Ralph Mazza		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 02 / 2014 Transaction ID : SA11AI.108343
Mailing Address 938 Alden Bridge		Amount of Each Receipt this Period 47.36
City Cary	State NC	Zip Code 27519
FEC ID number of contributing federal political committee. C	Name of Employer BCBSNC	Occupation Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.49	

SUBTOTAL of Receipts This Page (optional).....▶	142.08
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. C Ralph Mazza
Full Name (Last, First, Middle Initial)
Mailing Address 938 Alden Bridge

City Cary	State NC	Zip Code 27519
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Director
----------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
467.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2014

Transaction ID : SA11AI.108478

Amount of Each Receipt this Period
47.36

B. C Ralph Mazza
Full Name (Last, First, Middle Initial)
Mailing Address 938 Alden Bridge

City Cary	State NC	Zip Code 27519
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Director
----------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
515.21

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

Transaction ID : SA11AI.108607

Amount of Each Receipt this Period
47.36

C. C Ralph Mazza
Full Name (Last, First, Middle Initial)
Mailing Address 938 Alden Bridge

City Cary	State NC	Zip Code 27519
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Director
----------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
562.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2014

Transaction ID : SA11AI.108735

Amount of Each Receipt this Period
47.36

SUBTOTAL of Receipts This Page (optional).....▶	142.08
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. C Ralph Mazza
Full Name (Last, First, Middle Initial)
Mailing Address 938 Alden Bridge
City Cary State NC Zip Code 27519
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 609.93

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014
Transaction ID : SA11AI.108861
Amount of Each Receipt this Period
47.36

B. L Janet McCauley
Full Name (Last, First, Middle Initial)
Mailing Address 941 Old Lystra Road
City Chapel Hill State NC Zip Code 27517
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Medical Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 699.87

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2014
Transaction ID : SA11AI.108068
Amount of Each Receipt this Period
101.41

C. L Janet McCauley
Full Name (Last, First, Middle Initial)
Mailing Address 941 Old Lystra Road
City Chapel Hill State NC Zip Code 27517
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Medical Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 801.28

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2014
Transaction ID : SA11AI.108199
Amount of Each Receipt this Period
101.41

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.18
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 150
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. L Janet McCauley
 Full Name (Last, First, Middle Initial)
 Mailing Address 941 Old Lystra Road
 City Chapel Hill State NC Zip Code 27517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 902.69

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2014
Transaction ID : SA11Al.108344
 Amount of Each Receipt this Period
 101.41

B. L Janet McCauley
 Full Name (Last, First, Middle Initial)
 Mailing Address 941 Old Lystra Road
 City Chapel Hill State NC Zip Code 27517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1004.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2014
Transaction ID : SA11Al.108479
 Amount of Each Receipt this Period
 101.41

C. L Janet McCauley
 Full Name (Last, First, Middle Initial)
 Mailing Address 941 Old Lystra Road
 City Chapel Hill State NC Zip Code 27517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1105.51

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : SA11Al.108608
 Amount of Each Receipt this Period
 101.41

SUBTOTAL of Receipts This Page (optional).....▶	304.23
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. L Janet McCauley
Full Name (Last, First, Middle Initial)

Mailing Address 941 Old Lystra Road

City Chapel Hill	State NC	Zip Code 27517
---------------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Medical Director
----------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1206.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2014

Transaction ID : SA11Al.108736

Amount of Each Receipt this Period
101.41

B. L Janet McCauley
Full Name (Last, First, Middle Initial)

Mailing Address 941 Old Lystra Road

City Chapel Hill	State NC	Zip Code 27517
---------------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Medical Director
----------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1308.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2014

Transaction ID : SA11Al.108862

Amount of Each Receipt this Period
101.41

C. Lynn McNeal
Full Name (Last, First, Middle Initial)

Mailing Address 185 Swansea Lane

City Chapel Hill	State NC	Zip Code 27516
---------------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	04	/	2014

Transaction ID : SA11Al.108071

Amount of Each Receipt this Period
105.11

SUBTOTAL of Receipts This Page (optional).....▶	307.93
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Lynn McNeal
Full Name (Last, First, Middle Initial)

Mailing Address 185 Swansea Lane

City Chapel Hill State NC Zip Code 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **830.53**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11AI.108202

Amount of Each Receipt this Period
105.11

B. Lynn McNeal
Full Name (Last, First, Middle Initial)

Mailing Address 185 Swansea Lane

City Chapel Hill State NC Zip Code 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **935.64**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : SA11AI.108347

Amount of Each Receipt this Period
105.11

C. Lynn McNeal
Full Name (Last, First, Middle Initial)

Mailing Address 185 Swansea Lane

City Chapel Hill State NC Zip Code 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1040.75**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2014

Transaction ID : SA11AI.108482

Amount of Each Receipt this Period
105.11

SUBTOTAL of Receipts This Page (optional).....▶	315.33
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Lynn McNeal		Date of Receipt
Mailing Address 185 Swansea Lane		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chapel Hill	NC	27516
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.108611
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="105.11"/>
Name of Employer	Occupation	
BCBSNC	VP	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1145.86"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Lynn McNeal		Date of Receipt
Mailing Address 185 Swansea Lane		<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chapel Hill	NC	27516
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.108739
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="105.11"/>
Name of Employer	Occupation	
BCBSNC	VP	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1250.97"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Lynn McNeal		Date of Receipt
Mailing Address 185 Swansea Lane		<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chapel Hill	NC	27516
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.108865
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="105.11"/>
Name of Employer	Occupation	
BCBSNC	VP	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1356.08"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="315.33"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Debra Miller		Date of Receipt
Mailing Address 1712 Fairway Drive		<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City Newton	State NC	Zip Code 28658
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.108073
Name of Employer BCBSNC		Occupation VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="34.00"/>
		<input type="text" value="238.00"/>

Full Name (Last, First, Middle Initial) B. Debra Miller		Date of Receipt
Mailing Address 1712 Fairway Drive		<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City Newton	State NC	Zip Code 28658
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.108204
Name of Employer BCBSNC		Occupation VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="34.00"/>
		<input type="text" value="272.00"/>

Full Name (Last, First, Middle Initial) C. Debra Miller		Date of Receipt
Mailing Address 1712 Fairway Drive		<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City Newton	State NC	Zip Code 28658
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.108349
Name of Employer BCBSNC		Occupation VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="34.00"/>
		<input type="text" value="306.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="102.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 94 OF 150
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Debra Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 1712 Fairway Drive
 City State Zip Code
 Newton NC 28658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BCBSNC VP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2014
Transaction ID : SA11AI.108484
 Amount of Each Receipt this Period
 34.00

B. Debra Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 1712 Fairway Drive
 City State Zip Code
 Newton NC 28658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BCBSNC VP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 374.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : SA11AI.108613
 Amount of Each Receipt this Period
 34.00

C. Debra Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 1712 Fairway Drive
 City State Zip Code
 Newton NC 28658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BCBSNC VP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 408.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : SA11AI.108741
 Amount of Each Receipt this Period
 34.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 102.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Debra Miller
Full Name (Last, First, Middle Initial)

Mailing Address 1712 Fairway Drive

City Newton State NC Zip Code 28658

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **442.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014

Transaction ID : SA11AI.108867

Amount of Each Receipt this Period
34.00

B. Kathryn Millican
Full Name (Last, First, Middle Initial)

Mailing Address 1632 Lorraine Road

City Raleigh State NC Zip Code 27607

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

Name of Employer BCBSNC Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **263.19**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2014

Transaction ID : SA11AI.108075

Amount of Each Receipt this Period
50.24

C. Kathryn Millican
Full Name (Last, First, Middle Initial)

Mailing Address 1632 Lorraine Road

City Raleigh State NC Zip Code 27607

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

Name of Employer BCBSNC Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **306.46**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11AI.108206

Amount of Each Receipt this Period
43.27

SUBTOTAL of Receipts This Page (optional)..... **127.51**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Kathryn Millican
Full Name (Last, First, Middle Initial)
Mailing Address 1632 Lorraine Road
City Raleigh State NC Zip Code 27607
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 349.73

Date of Receipt
05 / 02 / 2014
Transaction ID : SA11AI.108351
Amount of Each Receipt this Period
43.27

B. Kathryn Millican
Full Name (Last, First, Middle Initial)
Mailing Address 1632 Lorraine Road
City Raleigh State NC Zip Code 27607
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.91

Date of Receipt
05 / 16 / 2014
Transaction ID : SA11AI.108486
Amount of Each Receipt this Period
41.18

C. Kathryn Millican
Full Name (Last, First, Middle Initial)
Mailing Address 1632 Lorraine Road
City Raleigh State NC Zip Code 27607
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 434.18

Date of Receipt
05 / 30 / 2014
Transaction ID : SA11AI.108615
Amount of Each Receipt this Period
43.27

SUBTOTAL of Receipts This Page (optional)..... ▶ 127.72
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 97 OF 150
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Kathryn Millican
 Full Name (Last, First, Middle Initial)
 Mailing Address 1632 Lorraine Road
 City Raleigh State NC Zip Code 27607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 477.45

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : SA11AI.108743
 Amount of Each Receipt this Period
 43.27

B. Kathryn Millican
 Full Name (Last, First, Middle Initial)
 Mailing Address 1632 Lorraine Road
 City Raleigh State NC Zip Code 27607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : SA11AI.108869
 Amount of Each Receipt this Period
 43.27

C. Barbara Morales-Burke
 Full Name (Last, First, Middle Initial)
 Mailing Address 5624 Bennetwood Ct
 City Raleigh State NC Zip Code 27612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 664.49

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2014
Transaction ID : SA11AI.108077
 Amount of Each Receipt this Period
 98.27

SUBTOTAL of Receipts This Page (optional)..... ▶ 184.81
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Barbara Morales-Burke			Date of Receipt
Mailing Address 5624 Bennetwood Ct			<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11Al.108208
Raleigh	NC	27612	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="98.27"/>
Name of Employer	Occupation		
BCBSNC	VP		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="762.76"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Barbara Morales-Burke			Date of Receipt
Mailing Address 5624 Bennetwood Ct			<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11Al.108353
Raleigh	NC	27612	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="98.27"/>
Name of Employer	Occupation		
BCBSNC	VP		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="861.03"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Barbara Morales-Burke			Date of Receipt
Mailing Address 5624 Bennetwood Ct			<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11Al.108488
Raleigh	NC	27612	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="98.27"/>
Name of Employer	Occupation		
BCBSNC	VP		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="959.30"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="294.81"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Barbara Morales-Burke
 Full Name (Last, First, Middle Initial)
 Mailing Address 5624 Bennetwood Ct
 City Raleigh State NC Zip Code 27612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1057.57

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : SA11AI.108617
 Amount of Each Receipt this Period
 98.27

B. Barbara Morales-Burke
 Full Name (Last, First, Middle Initial)
 Mailing Address 5624 Bennetwood Ct
 City Raleigh State NC Zip Code 27612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1155.84

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : SA11AI.108745
 Amount of Each Receipt this Period
 98.27

C. Barbara Morales-Burke
 Full Name (Last, First, Middle Initial)
 Mailing Address 5624 Bennetwood Ct
 City Raleigh State NC Zip Code 27612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1254.11

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : SA11AI.108871
 Amount of Each Receipt this Period
 98.27

SUBTOTAL of Receipts This Page (optional)..... ▶ 294.81
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Steve Nelson
Full Name (Last, First, Middle Initial)

Mailing Address 101 Flagstone Court

City Chapel Hill State NC Zip Code 27517

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

Name of Employer Occupation
Managing Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
332.68

Date of Receipt
06 / 13 / 2014
Transaction ID : SA11AI.108934

Amount of Each Receipt this Period
166.34
contribution

B. Denis Oconnell
Full Name (Last, First, Middle Initial)

Mailing Address 3200 Quail Landing Ct

City Raleigh State NC Zip Code 27612

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

Name of Employer Occupation
BCBSNC Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
04 / 04 / 2014
Transaction ID : SA11AI.108080

Amount of Each Receipt this Period
50.00

C. Denis Oconnell
Full Name (Last, First, Middle Initial)

Mailing Address 3200 Quail Landing Ct

City Raleigh State NC Zip Code 27612

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

Name of Employer Occupation
BCBSNC Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
04 / 17 / 2014
Transaction ID : SA11AI.108211

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 266.34

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Denis Oconnell
Full Name (Last, First, Middle Initial)
Mailing Address 3200 Quail Landing Ct
City Raleigh State NC Zip Code 27612
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Medical Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt
05 / 02 / 2014
Transaction ID : SA11AI.108356
Amount of Each Receipt this Period
50.00

B. Denis Oconnell
Full Name (Last, First, Middle Initial)
Mailing Address 3200 Quail Landing Ct
City Raleigh State NC Zip Code 27612
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Medical Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
05 / 16 / 2014
Transaction ID : SA11AI.108491
Amount of Each Receipt this Period
50.00

C. Denis Oconnell
Full Name (Last, First, Middle Initial)
Mailing Address 3200 Quail Landing Ct
City Raleigh State NC Zip Code 27612
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Medical Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt
05 / 30 / 2014
Transaction ID : SA11AI.108620
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Denis Oconnell
Full Name (Last, First, Middle Initial)
Mailing Address 3200 Quail Landing Ct
City Raleigh State NC Zip Code 27612
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Medical Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt
06 / 13 / 2014
Transaction ID : SA11Al.108748
Amount of Each Receipt this Period
50.00

B. Denis Oconnell
Full Name (Last, First, Middle Initial)
Mailing Address 3200 Quail Landing Ct
City Raleigh State NC Zip Code 27612
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Medical Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt
06 / 27 / 2014
Transaction ID : SA11Al.108874
Amount of Each Receipt this Period
50.00

C. Maureen OConnor
Full Name (Last, First, Middle Initial)
Mailing Address 104 Beeston Ct.
City Morrisville State NC Zip Code 27560
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation SVP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1346.10

Date of Receipt
04 / 04 / 2014
Transaction ID : SA11Al.108081
Amount of Each Receipt this Period
192.30

SUBTOTAL of Receipts This Page (optional)..... ▶ 292.30
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Maureen OConnor
Full Name (Last, First, Middle Initial)
Mailing Address 104 Beeston Ct.
City Morrisville State NC Zip Code 27560
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation SVP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1538.40

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 17 / 2014
Transaction ID : SA11Al.108212
Amount of Each Receipt this Period
192.30

B. Maureen OConnor
Full Name (Last, First, Middle Initial)
Mailing Address 104 Beeston Ct.
City Morrisville State NC Zip Code 27560
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation SVP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1730.70

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 02 / 2014
Transaction ID : SA11Al.108357
Amount of Each Receipt this Period
192.30

C. Maureen OConnor
Full Name (Last, First, Middle Initial)
Mailing Address 104 Beeston Ct.
City Morrisville State NC Zip Code 27560
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation SVP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1923.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 16 / 2014
Transaction ID : SA11Al.108492
Amount of Each Receipt this Period
192.30

SUBTOTAL of Receipts This Page (optional)..... ▶ 576.90
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Maureen OConnor		Date of Receipt
Mailing Address 104 Beeston Ct.		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Morrisville	NC	27560
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.108621
Name of Employer	Occupation	Amount of Each Receipt this Period
BCBSNC	SVP	<input type="text" value="192.30"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2115.30"/>	

Full Name (Last, First, Middle Initial) B. Maureen OConnor		Date of Receipt
Mailing Address 104 Beeston Ct.		<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City	State	Zip Code
Morrisville	NC	27560
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.108749
Name of Employer	Occupation	Amount of Each Receipt this Period
BCBSNC	SVP	<input type="text" value="192.30"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2307.60"/>	

Full Name (Last, First, Middle Initial) C. Maureen OConnor		Date of Receipt
Mailing Address 104 Beeston Ct.		<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Morrisville	NC	27560
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.108875
Name of Employer	Occupation	Amount of Each Receipt this Period
BCBSNC	SVP	<input type="text" value="192.30"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2499.90"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="576.90"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Troy Page
Full Name (Last, First, Middle Initial)
Mailing Address 504 Robert Hunt Drive

City Carrboro	State NC	Zip Code 27510
------------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Director
----------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

Transaction ID : SA11Al.108622

Amount of Each Receipt this Period
20.00

B. Troy Page
Full Name (Last, First, Middle Initial)
Mailing Address 504 Robert Hunt Drive

City Carrboro	State NC	Zip Code 27510
------------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Director
----------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2014

Transaction ID : SA11Al.108750

Amount of Each Receipt this Period
20.00

C. Troy Page
Full Name (Last, First, Middle Initial)
Mailing Address 504 Robert Hunt Drive

City Carrboro	State NC	Zip Code 27510
------------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Director
----------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2014

Transaction ID : SA11Al.108876

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Fara Palumbo		Date of Receipt
Mailing Address 1000 Gloucester Ct		M M M / D D D / Y Y Y Y Y Y 04 / 04 / 2014
City	State	Zip Code
Chapel Hill	NC	27516
FEC ID number of contributing federal political committee.	Transaction ID : SA11AI.108083	
	Amount of Each Receipt this Period	
	150.00	
Name of Employer	Occupation	
BCBSNC	VP	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	1050.00	

Full Name (Last, First, Middle Initial) B. Fara Palumbo		Date of Receipt
Mailing Address 1000 Gloucester Ct		M M M / D D D / Y Y Y Y Y Y 04 / 17 / 2014
City	State	Zip Code
Chapel Hill	NC	27516
FEC ID number of contributing federal political committee.	Transaction ID : SA11AI.108214	
	Amount of Each Receipt this Period	
	150.00	
Name of Employer	Occupation	
BCBSNC	VP	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	1200.00	

Full Name (Last, First, Middle Initial) C. Fara Palumbo		Date of Receipt
Mailing Address 1000 Gloucester Ct		M M M / D D D / Y Y Y Y Y Y 05 / 02 / 2014
City	State	Zip Code
Chapel Hill	NC	27516
FEC ID number of contributing federal political committee.	Transaction ID : SA11AI.108359	
	Amount of Each Receipt this Period	
	150.00	
Name of Employer	Occupation	
BCBSNC	VP	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	1350.00	

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Fara Palumbo		Date of Receipt MM / DD / YYYY 05 / 16 / 2014 Transaction ID : SA11AI.108494
Mailing Address 1000 Gloucester Ct		Amount of Each Receipt this Period 150.00
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C	Name of Employer BCBSNC	Occupation VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. Fara Palumbo		Date of Receipt MM / DD / YYYY 05 / 30 / 2014 Transaction ID : SA11AI.108623
Mailing Address 1000 Gloucester Ct		Amount of Each Receipt this Period 150.00
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C	Name of Employer BCBSNC	Occupation VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1650.00	

Full Name (Last, First, Middle Initial) C. Fara Palumbo		Date of Receipt MM / DD / YYYY 06 / 13 / 2014 Transaction ID : SA11AI.108751
Mailing Address 1000 Gloucester Ct		Amount of Each Receipt this Period 150.00
City Chapel Hill	State NC	Zip Code 27516
FEC ID number of contributing federal political committee. C	Name of Employer BCBSNC	Occupation VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00	

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Fara Palumbo		Date of Receipt
Mailing Address 1000 Gloucester Ct		<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chapel Hill	NC	27516
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.108877
Name of Employer	Occupation	Amount of Each Receipt this Period
BCBSNC	VP	<input type="text" value="150.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1950.00"/>	

Full Name (Last, First, Middle Initial) B. Michael J Parkerson		Date of Receipt
Mailing Address 7504 Clayshant Court		<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	Zip Code
Wake Forest	NC	27587
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.108084
Name of Employer	Occupation	Amount of Each Receipt this Period
BCBSNC	VP	<input type="text" value="117.14"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="802.93"/>	

Full Name (Last, First, Middle Initial) C. Michael J Parkerson		Date of Receipt
Mailing Address 7504 Clayshant Court		<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
Wake Forest	NC	27587
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.108215
Name of Employer	Occupation	Amount of Each Receipt this Period
BCBSNC	VP	<input type="text" value="117.14"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="920.07"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="384.28"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Michael J Parkerson
Full Name (Last, First, Middle Initial)

Mailing Address 7504 Clayshant Court

City Wake Forest State NC Zip Code 27587

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1037.21**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : SA11Al.108360

Amount of Each Receipt this Period
117.14

B. Michael J Parkerson
Full Name (Last, First, Middle Initial)

Mailing Address 7504 Clayshant Court

City Wake Forest State NC Zip Code 27587

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1154.35**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2014

Transaction ID : SA11Al.108495

Amount of Each Receipt this Period
117.14

C. Michael J Parkerson
Full Name (Last, First, Middle Initial)

Mailing Address 7504 Clayshant Court

City Wake Forest State NC Zip Code 27587

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1271.49**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : SA11Al.108624

Amount of Each Receipt this Period
117.14

SUBTOTAL of Receipts This Page (optional).....▶	351.42
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Michael J Parkerson
Full Name (Last, First, Middle Initial)

Mailing Address 7504 Clayshant Court

City Wake Forest State NC Zip Code 27587

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1388.63**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2014

Transaction ID : SA11AI.108752

Amount of Each Receipt this Period
117.14

B. Michael J Parkerson
Full Name (Last, First, Middle Initial)

Mailing Address 7504 Clayshant Court

City Wake Forest State NC Zip Code 27587

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1505.77**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014

Transaction ID : SA11AI.108878

Amount of Each Receipt this Period
117.14

C. W Mitchell Perry
Full Name (Last, First, Middle Initial)

Mailing Address 1909 Rangecrest Rd

City Raleigh State NC Zip Code 27612

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **819.20**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2014

Transaction ID : SA11AI.108086

Amount of Each Receipt this Period
121.15

SUBTOTAL of Receipts This Page (optional).....▶	355.43
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. W Mitchell Perry
Full Name (Last, First, Middle Initial)
Mailing Address 1909 Rangecrest Rd
City Raleigh State NC Zip Code 27612
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **940.35**

Date of Receipt **04 / 17 / 2014**
Transaction ID : SA11AI.108217
Amount of Each Receipt this Period **121.15**

B. W Mitchell Perry
Full Name (Last, First, Middle Initial)
Mailing Address 1909 Rangecrest Rd
City Raleigh State NC Zip Code 27612
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1061.50**

Date of Receipt **05 / 02 / 2014**
Transaction ID : SA11AI.108362
Amount of Each Receipt this Period **121.15**

C. W Mitchell Perry
Full Name (Last, First, Middle Initial)
Mailing Address 1909 Rangecrest Rd
City Raleigh State NC Zip Code 27612
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1182.65**

Date of Receipt **05 / 16 / 2014**
Transaction ID : SA11AI.108497
Amount of Each Receipt this Period **121.15**

SUBTOTAL of Receipts This Page (optional)..... **363.45**
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. W Mitchell Perry
Full Name (Last, First, Middle Initial)
Mailing Address 1909 Rangecrest Rd
City Raleigh State NC Zip Code 27612
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1303.80

Date of Receipt
05 / 30 / 2014
Transaction ID : SA11AI.108626
Amount of Each Receipt this Period
121.15

B. W Mitchell Perry
Full Name (Last, First, Middle Initial)
Mailing Address 1909 Rangecrest Rd
City Raleigh State NC Zip Code 27612
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1424.95

Date of Receipt
06 / 13 / 2014
Transaction ID : SA11AI.108754
Amount of Each Receipt this Period
121.15

C. W Mitchell Perry
Full Name (Last, First, Middle Initial)
Mailing Address 1909 Rangecrest Rd
City Raleigh State NC Zip Code 27612
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1546.10

Date of Receipt
06 / 27 / 2014
Transaction ID : SA11AI.108880
Amount of Each Receipt this Period
121.15

SUBTOTAL of Receipts This Page (optional)..... ▶ 363.45
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Gerald Petkau		Date of Receipt
Mailing Address 402 Troycott Place		<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cary	NC	27519
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.108087
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="192.30"/>
Name of Employer	Occupation	
BCBSNC	VP	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1346.10"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Gerald Petkau		Date of Receipt
Mailing Address 402 Troycott Place		<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cary	NC	27519
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.108218
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="192.30"/>
Name of Employer	Occupation	
BCBSNC	VP	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1538.40"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Gerald Petkau		Date of Receipt
Mailing Address 402 Troycott Place		<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cary	NC	27519
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.108363
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="192.30"/>
Name of Employer	Occupation	
BCBSNC	VP	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1730.70"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="576.90"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Gerald Petkau		Date of Receipt MM / DD / YYYY 05 / 16 / 2014 Transaction ID : SA11AI.108498
Mailing Address 402 Troycott Place		Amount of Each Receipt this Period 192.30
City Cary	State NC	Zip Code 27519
FEC ID number of contributing federal political committee.	C	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1923.00	

Full Name (Last, First, Middle Initial) B. Gerald Petkau		Date of Receipt MM / DD / YYYY 05 / 30 / 2014 Transaction ID : SA11AI.108627
Mailing Address 402 Troycott Place		Amount of Each Receipt this Period 192.30
City Cary	State NC	Zip Code 27519
FEC ID number of contributing federal political committee.	C	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2115.30	

Full Name (Last, First, Middle Initial) C. Gerald Petkau		Date of Receipt MM / DD / YYYY 06 / 13 / 2014 Transaction ID : SA11AI.108755
Mailing Address 402 Troycott Place		Amount of Each Receipt this Period 192.30
City Cary	State NC	Zip Code 27519
FEC ID number of contributing federal political committee.	C	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2307.60	

SUBTOTAL of Receipts This Page (optional).....▶	576.90
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Gerald Petkau			Date of Receipt
Mailing Address 402 Troycott Place			M M M / D D D / Y Y Y Y Y Y 06 / 27 / 2014
City	State	Zip Code	Transaction ID : SA11AI.108881
Cary	NC	27519	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.30
Name of Employer	Occupation		
BCBSNC	VP		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼	2499.90		

Full Name (Last, First, Middle Initial) B. Jim Phillips			Date of Receipt
Mailing Address PO Box 26000			M M M / D D D / Y Y Y Y Y Y 06 / 13 / 2014
City	State	Zip Code	Transaction ID : SA11AI.108936
Greensboro	NC	27420	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer	Occupation		contribution
	Partner		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼	300.00		

Full Name (Last, First, Middle Initial) C. K Nathan Prather			Date of Receipt
Mailing Address 319 Montibello Drive			M M M / D D D / Y Y Y Y Y Y 04 / 04 / 2014
City	State	Zip Code	Transaction ID : SA11AI.108092
Cary	NC	27513	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		148.05
Name of Employer	Occupation		
BCBSNC	VP		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼	978.65		

SUBTOTAL of Receipts This Page (optional).....▶	490.35
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. K Nathan Prather
Full Name (Last, First, Middle Initial)
Mailing Address 319 Montibello Drive

City Cary	State NC	Zip Code 27513
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1126.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04	/	17	/	2014

Transaction ID : SA11AI.108222

Amount of Each Receipt this Period
148.05

B. K Nathan Prather
Full Name (Last, First, Middle Initial)
Mailing Address 319 Montibello Drive

City Cary	State NC	Zip Code 27513
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1274.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05	/	02	/	2014

Transaction ID : SA11AI.108367

Amount of Each Receipt this Period
148.05

C. K Nathan Prather
Full Name (Last, First, Middle Initial)
Mailing Address 319 Montibello Drive

City Cary	State NC	Zip Code 27513
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1422.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05	/	16	/	2014

Transaction ID : SA11AI.108502

Amount of Each Receipt this Period
148.05

SUBTOTAL of Receipts This Page (optional).....▶	444.15
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. K Nathan Prather
Full Name (Last, First, Middle Initial)
Mailing Address 319 Montibello Drive

City Cary	State NC	Zip Code 27513
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1570.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

Transaction ID : SA11AI.108630

Amount of Each Receipt this Period
148.05

B. K Nathan Prather
Full Name (Last, First, Middle Initial)
Mailing Address 319 Montibello Drive

City Cary	State NC	Zip Code 27513
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1718.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2014

Transaction ID : SA11AI.108758

Amount of Each Receipt this Period
148.05

C. K Nathan Prather
Full Name (Last, First, Middle Initial)
Mailing Address 319 Montibello Drive

City Cary	State NC	Zip Code 27513
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation VP
----------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1866.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2014

Transaction ID : SA11AI.108884

Amount of Each Receipt this Period
148.05

SUBTOTAL of Receipts This Page (optional).....▶	444.15
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. W David Raper
Full Name (Last, First, Middle Initial)

Mailing Address 205 Swansboro Dr

City Cary	State NC	Zip Code 27519
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Bus/Analyst
----------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	04	/	2014

Transaction ID : SA11AI.108094

Amount of Each Receipt this Period
30.00

B. W David Raper
Full Name (Last, First, Middle Initial)

Mailing Address 205 Swansboro Dr

City Cary	State NC	Zip Code 27519
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Bus/Analyst
----------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2014

Transaction ID : SA11AI.108224

Amount of Each Receipt this Period
30.00

C. W David Raper
Full Name (Last, First, Middle Initial)

Mailing Address 205 Swansboro Dr

City Cary	State NC	Zip Code 27519
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Bus/Analyst
----------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2014

Transaction ID : SA11AI.108369

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. W David Raper			Date of Receipt
Mailing Address 205 Swansboro Dr			M M M / D D D / Y Y Y Y Y Y 05 / 16 / 2014
City	State	Zip Code	Transaction ID : SA11AI.108504
Cary	NC	27519	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer	Occupation		
BCBSNC	Bus/Analyst		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼	300.00		

Full Name (Last, First, Middle Initial) B. W David Raper			Date of Receipt
Mailing Address 205 Swansboro Dr			M M M / D D D / Y Y Y Y Y Y 05 / 30 / 2014
City	State	Zip Code	Transaction ID : SA11AI.108632
Cary	NC	27519	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer	Occupation		
BCBSNC	Bus/Analyst		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼	330.00		

Full Name (Last, First, Middle Initial) C. W David Raper			Date of Receipt
Mailing Address 205 Swansboro Dr			M M M / D D D / Y Y Y Y Y Y 06 / 13 / 2014
City	State	Zip Code	Transaction ID : SA11AI.108760
Cary	NC	27519	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer	Occupation		
BCBSNC	Bus/Analyst		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼	360.00		

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 150
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. W David Raper
 Full Name (Last, First, Middle Initial)
 Mailing Address 205 Swansboro Dr
 City State Zip Code
 Cary NC 27519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BCBSNC Bus/Analyst
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : SA11AI.108886
 Amount of Each Receipt this Period
 30.00

B. Paul Reeves
 Full Name (Last, First, Middle Initial)
 Mailing Address 236 Coachlight Trail
 City State Zip Code
 Burlington NC 27215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BCBSNC Project Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 235.23

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2014
Transaction ID : SA11AI.108095
 Amount of Each Receipt this Period
 34.39

C. Paul Reeves
 Full Name (Last, First, Middle Initial)
 Mailing Address 236 Coachlight Trail
 City State Zip Code
 Burlington NC 27215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BCBSNC Project Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 269.62

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2014
Transaction ID : SA11AI.108225
 Amount of Each Receipt this Period
 34.39

SUBTOTAL of Receipts This Page (optional).....▶	98.78
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 150
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Paul Reeves
 Full Name (Last, First, Middle Initial)
 Mailing Address 236 Coachlight Trail
 City Burlington State NC Zip Code 27215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Project Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 304.01

Date of Receipt
 05 / 02 / 2014
Transaction ID : SA11AI.108370
 Amount of Each Receipt this Period
 34.39

B. Paul Reeves
 Full Name (Last, First, Middle Initial)
 Mailing Address 236 Coachlight Trail
 City Burlington State NC Zip Code 27215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Project Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 338.40

Date of Receipt
 05 / 16 / 2014
Transaction ID : SA11AI.108505
 Amount of Each Receipt this Period
 34.39

C. Paul Reeves
 Full Name (Last, First, Middle Initial)
 Mailing Address 236 Coachlight Trail
 City Burlington State NC Zip Code 27215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Project Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 372.79

Date of Receipt
 05 / 30 / 2014
Transaction ID : SA11AI.108633
 Amount of Each Receipt this Period
 34.39

SUBTOTAL of Receipts This Page (optional).....▶	103.17
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Paul Reeves
Full Name (Last, First, Middle Initial)
Mailing Address 236 Coachlight Trail

City Burlington	State NC	Zip Code 27215
--------------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Project Manager
----------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
407.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2014

Transaction ID : SA11Al.108761

Amount of Each Receipt this Period
34.39

B. Paul Reeves
Full Name (Last, First, Middle Initial)
Mailing Address 236 Coachlight Trail

City Burlington	State NC	Zip Code 27215
--------------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Project Manager
----------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
441.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2014

Transaction ID : SA11Al.108887

Amount of Each Receipt this Period
34.39

C. Melissa Robinson
Full Name (Last, First, Middle Initial)
Mailing Address 15 Willowspring Place

City Chapel Hill	State NC	Zip Code 27517
---------------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Director
----------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.11

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	04	/	2014

Transaction ID : SA11Al.108097

Amount of Each Receipt this Period
35.03

SUBTOTAL of Receipts This Page (optional).....▶	103.81
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Melissa Robinson		Date of Receipt
Mailing Address 15 Willowspring Place		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chapel Hill	NC	27517
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.108635
Name of Employer	Occupation	Amount of Each Receipt this Period
BCBSNC	Director	<input type="text" value="35.03"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="380.23"/>	

Full Name (Last, First, Middle Initial) B. Melissa Robinson		Date of Receipt
Mailing Address 15 Willowspring Place		<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chapel Hill	NC	27517
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.108763
Name of Employer	Occupation	Amount of Each Receipt this Period
BCBSNC	Director	<input type="text" value="35.03"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="415.26"/>	

Full Name (Last, First, Middle Initial) C. Melissa Robinson		Date of Receipt
Mailing Address 15 Willowspring Place		<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Chapel Hill	NC	27517
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.108889
Name of Employer	Occupation	Amount of Each Receipt this Period
BCBSNC	Director	<input type="text" value="35.03"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="450.29"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="105.09"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Mr. John Roos
Full Name (Last, First, Middle Initial)
Mailing Address 119 Draymore Way
City Morrisville State NC Zip Code 27560
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation SVP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1346.10

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 04 / 2014
Transaction ID : SA11AI.108098
Amount of Each Receipt this Period
192.30

B. Mr. John Roos
Full Name (Last, First, Middle Initial)
Mailing Address 119 Draymore Way
City Morrisville State NC Zip Code 27560
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation SVP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1538.40

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 17 / 2014
Transaction ID : SA11AI.108228
Amount of Each Receipt this Period
192.30

C. Mr. John Roos
Full Name (Last, First, Middle Initial)
Mailing Address 119 Draymore Way
City Morrisville State NC Zip Code 27560
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation SVP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1730.70

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 02 / 2014
Transaction ID : SA11AI.108373
Amount of Each Receipt this Period
192.30

SUBTOTAL of Receipts This Page (optional)..... ▶ 576.90
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Mr. John Roos
Full Name (Last, First, Middle Initial)

Mailing Address 119 Draymore Way

City Morrisville State NC Zip Code 27560

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1923.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2014
Transaction ID : SA11AI.108508

Amount of Each Receipt this Period
 192.30

B. Mr. John Roos
Full Name (Last, First, Middle Initial)

Mailing Address 119 Draymore Way

City Morrisville State NC Zip Code 27560

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2115.30

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : SA11AI.108636

Amount of Each Receipt this Period
 192.30

C. Mr. John Roos
Full Name (Last, First, Middle Initial)

Mailing Address 119 Draymore Way

City Morrisville State NC Zip Code 27560

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2307.60

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : SA11AI.108764

Amount of Each Receipt this Period
 192.30

SUBTOTAL of Receipts This Page (optional)..... ▶ 576.90

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

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

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

FOR LINE NUMBER: PAGE 127 OF 150
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Mr. John Roos
 Full Name (Last, First, Middle Initial)
 Mailing Address 119 Draymore Way
 City Morrisville State NC Zip Code 27560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2499.90

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : SA11AI.108890
 Amount of Each Receipt this Period
 192.30

B. V Tarsha Rowland
 Full Name (Last, First, Middle Initial)
 Mailing Address 5021 Robinwood Rd
 City Durham State NC Zip Code 27713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 516.94

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 04 / 2014
Transaction ID : SA11AI.108099
 Amount of Each Receipt this Period
 75.77

C. V Tarsha Rowland
 Full Name (Last, First, Middle Initial)
 Mailing Address 5021 Robinwood Rd
 City Durham State NC Zip Code 27713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 592.71

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 17 / 2014
Transaction ID : SA11AI.108229
 Amount of Each Receipt this Period
 75.77

SUBTOTAL of Receipts This Page (optional)..... ▶ 343.84
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. V Tarsha Rowland		Date of Receipt
Mailing Address 5021 Robinwood Rd		<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.108374
Durham	NC	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="75.77"/>
Name of Employer	Occupation	
BCBSNC	Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="668.48"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. V Tarsha Rowland		Date of Receipt
Mailing Address 5021 Robinwood Rd		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.108509
Durham	NC	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="75.77"/>
Name of Employer	Occupation	
BCBSNC	Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="744.25"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. V Tarsha Rowland		Date of Receipt
Mailing Address 5021 Robinwood Rd		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.108637
Durham	NC	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="75.77"/>
Name of Employer	Occupation	
BCBSNC	Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="820.02"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="227.31"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. V Tarsha Rowland
Full Name (Last, First, Middle Initial)
Mailing Address 5021 Robinwood Rd
City Durham State NC Zip Code 27713
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 895.79

Date of Receipt
06 / 13 / 2014
Transaction ID : SA11Al.108765
Amount of Each Receipt this Period 75.77

B. V Tarsha Rowland
Full Name (Last, First, Middle Initial)
Mailing Address 5021 Robinwood Rd
City Durham State NC Zip Code 27713
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 971.56

Date of Receipt
06 / 27 / 2014
Transaction ID : SA11Al.108891
Amount of Each Receipt this Period 75.77

C. Maticia Sims
Full Name (Last, First, Middle Initial)
Mailing Address 8 Sandhills Lane
City Durham State NC Zip Code 27713
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 586.15

Date of Receipt
04 / 04 / 2014
Transaction ID : SA11Al.108103
Amount of Each Receipt this Period 86.35

SUBTOTAL of Receipts This Page (optional).....▶ 237.89
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Maticia Sims		Date of Receipt
Mailing Address 8 Sandhills Lane		<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.108233
Name of Employer BCBSNC		Amount of Each Receipt this Period
Occupation VP		<input type="text" value="86.35"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="672.50"/>	

Full Name (Last, First, Middle Initial) B. Maticia Sims		Date of Receipt
Mailing Address 8 Sandhills Lane		<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.108378
Name of Employer BCBSNC		Amount of Each Receipt this Period
Occupation VP		<input type="text" value="86.35"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="758.85"/>	

Full Name (Last, First, Middle Initial) C. Maticia Sims		Date of Receipt
Mailing Address 8 Sandhills Lane		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.108513
Name of Employer BCBSNC		Amount of Each Receipt this Period
Occupation VP		<input type="text" value="86.35"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="845.20"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="259.05"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 131 OF 150
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Maticia Sims			Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 30 / 2014 Transaction ID : SA11AI.108641		
Mailing Address 8 Sandhills Lane			Amount of Each Receipt this Period 86.35		
City Durham	State NC	Zip Code 27713			
FEC ID number of contributing federal political committee. C					
Name of Employer BCBSNC		Occupation VP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 931.55			

Full Name (Last, First, Middle Initial) B. Maticia Sims			Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 13 / 2014 Transaction ID : SA11AI.108769		
Mailing Address 8 Sandhills Lane			Amount of Each Receipt this Period 86.35		
City Durham	State NC	Zip Code 27713			
FEC ID number of contributing federal political committee. C					
Name of Employer BCBSNC		Occupation VP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1017.90			

Full Name (Last, First, Middle Initial) C. Maticia Sims			Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 27 / 2014 Transaction ID : SA11AI.108895		
Mailing Address 8 Sandhills Lane			Amount of Each Receipt this Period 86.35		
City Durham	State NC	Zip Code 27713			
FEC ID number of contributing federal political committee. C					
Name of Employer BCBSNC		Occupation VP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1104.25			

SUBTOTAL of Receipts This Page (optional).....▶	259.05
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 132 OF 150
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. R John Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 8320 Shiloh Creek Court
 City Raleigh State NC Zip Code 27616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2014
Transaction ID : SA11AI.108379
 Amount of Each Receipt this Period
 25.00

B. R John Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 8320 Shiloh Creek Court
 City Raleigh State NC Zip Code 27616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2014
Transaction ID : SA11AI.108514
 Amount of Each Receipt this Period
 25.00

C. R John Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 8320 Shiloh Creek Court
 City Raleigh State NC Zip Code 27616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : SA11AI.108642
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. R John Smith
Full Name (Last, First, Middle Initial)

Mailing Address 8320 Shiloh Creek Court

City Raleigh State NC Zip Code 27616

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

Name of Employer BCBSNC Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2014

Transaction ID : SA11AI.108770

Amount of Each Receipt this Period
25.00

B. R John Smith
Full Name (Last, First, Middle Initial)

Mailing Address 8320 Shiloh Creek Court

City Raleigh State NC Zip Code 27616

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

Name of Employer BCBSNC Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014

Transaction ID : SA11AI.108898

Amount of Each Receipt this Period
25.00

C. William Smith
Full Name (Last, First, Middle Initial)

Mailing Address 303 Lynden Valley Court

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : SA11AI.108643

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **70.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. William Smith
Full Name (Last, First, Middle Initial)

Mailing Address 303 Lynden Valley Court

City Cary	State NC	Zip Code 27519
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Director
----------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06	/	13	/	2014

Transaction ID : SA11Al.108771

Amount of Each Receipt this Period
20.00

B. William Smith
Full Name (Last, First, Middle Initial)

Mailing Address 303 Lynden Valley Court

City Cary	State NC	Zip Code 27519
--------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Director
----------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06	/	27	/	2014

Transaction ID : SA11Al.108899

Amount of Each Receipt this Period
20.00

C. Richard Supinski
Full Name (Last, First, Middle Initial)

Mailing Address 2610 Lochmore Drive

City Raleigh	State NC	Zip Code 27608
-----------------	-------------	-------------------

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

Name of Employer BCBSNC	Occupation Director
----------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04	/	04	/	2014

Transaction ID : SA11Al.108113

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Richard Supinski
Full Name (Last, First, Middle Initial)

Mailing Address 2610 Lochmore Drive

City Raleigh State NC Zip Code 27608

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2014
Transaction ID : SA11AI.108243

Amount of Each Receipt this Period
 30.00

B. Richard Supinski
Full Name (Last, First, Middle Initial)

Mailing Address 2610 Lochmore Drive

City Raleigh State NC Zip Code 27608

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2014
Transaction ID : SA11AI.108388

Amount of Each Receipt this Period
 30.00

C. Richard Supinski
Full Name (Last, First, Middle Initial)

Mailing Address 2610 Lochmore Drive

City Raleigh State NC Zip Code 27608

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2014
Transaction ID : SA11AI.108523

Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 136 OF 150
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Kara Taff
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Morgans Ridge Lane
 City Durham State NC Zip Code 27707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2014
Transaction ID : SA11Al.108114
 Amount of Each Receipt this Period
 50.00

B. Kara Taff
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Morgans Ridge Lane
 City Durham State NC Zip Code 27707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2014
Transaction ID : SA11Al.108244
 Amount of Each Receipt this Period
 50.00

C. Kara Taff
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Morgans Ridge Lane
 City Durham State NC Zip Code 27707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2014
Transaction ID : SA11Al.108389
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Kara Taff
Full Name (Last, First, Middle Initial)
Mailing Address 7 Morgans Ridge Lane
City Durham State NC Zip Code 27707
FEC ID number of contributing federal political committee. C
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 16 / 2014
Transaction ID : SA11AI.108524
Amount of Each Receipt this Period
50.00

B. Kara Taff
Full Name (Last, First, Middle Initial)
Mailing Address 7 Morgans Ridge Lane
City Durham State NC Zip Code 27707
FEC ID number of contributing federal political committee. C
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 30 / 2014
Transaction ID : SA11AI.108651
Amount of Each Receipt this Period
50.00

C. Kara Taff
Full Name (Last, First, Middle Initial)
Mailing Address 7 Morgans Ridge Lane
City Durham State NC Zip Code 27707
FEC ID number of contributing federal political committee. C
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 13 / 2014
Transaction ID : SA11AI.108779
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Kara Taff
Full Name (Last, First, Middle Initial)

Mailing Address 7 Morgans Ridge Lane

City Durham State NC Zip Code 27707

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 27 / 2014

Transaction ID : SA11Al.108907

Amount of Each Receipt this Period
50.00

B. Susan Weaver
Full Name (Last, First, Middle Initial)

Mailing Address 811 Harvey St

City Raleigh State NC Zip Code 27608

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **560.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 04 / 2014

Transaction ID : SA11Al.108119

Amount of Each Receipt this Period
80.00

C. Susan Weaver
Full Name (Last, First, Middle Initial)

Mailing Address 811 Harvey St

City Raleigh State NC Zip Code 27608

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **640.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11Al.108249

Amount of Each Receipt this Period
80.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **210.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Susan Weaver
Full Name (Last, First, Middle Initial)
Mailing Address 811 Harvey St
City Raleigh State NC Zip Code 27608
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 720.00

Date of Receipt
05 / 02 / 2014
Transaction ID : SA11AI.108394
Amount of Each Receipt this Period 80.00

B. Susan Weaver
Full Name (Last, First, Middle Initial)
Mailing Address 811 Harvey St
City Raleigh State NC Zip Code 27608
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt
05 / 16 / 2014
Transaction ID : SA11AI.108529
Amount of Each Receipt this Period 80.00

C. Susan Weaver
Full Name (Last, First, Middle Initial)
Mailing Address 811 Harvey St
City Raleigh State NC Zip Code 27608
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 880.00

Date of Receipt
05 / 30 / 2014
Transaction ID : SA11AI.108656
Amount of Each Receipt this Period 80.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 240.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Susan Weaver
Full Name (Last, First, Middle Initial)
Mailing Address 811 Harvey St
City Raleigh State NC Zip Code 27608
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **960.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2014
Transaction ID : SA11AI.108784
Amount of Each Receipt this Period
80.00

B. Susan Weaver
Full Name (Last, First, Middle Initial)
Mailing Address 811 Harvey St
City Raleigh State NC Zip Code 27608
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1040.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014
Transaction ID : SA11AI.108912
Amount of Each Receipt this Period
80.00

C. E Mark Werner
Full Name (Last, First, Middle Initial)
Mailing Address 202 Witheridge Ct.
City apex State NC Zip Code 27502
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **221.04**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2014
Transaction ID : SA11AI.108786
Amount of Each Receipt this Period
55.26

SUBTOTAL of Receipts This Page (optional)..... **215.26**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. E Mark Werner		Date of Receipt
Mailing Address 202 Witheridge Ct.		<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City apex	State NC	Zip Code 27502
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.108914
Name of Employer BCBSNC		Occupation VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="276.30"/>	
		Amount of Each Receipt this Period <input type="text" value="55.26"/>

Full Name (Last, First, Middle Initial) B. Mr. James Wilson		Date of Receipt
Mailing Address 227 Midenhall Way		<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City Cary	State NC	Zip Code 27513
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.108121
Name of Employer BCBSNC		Occupation SVP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1346.10"/>	
		Amount of Each Receipt this Period <input type="text" value="192.30"/>

Full Name (Last, First, Middle Initial) C. Mr. James Wilson		Date of Receipt
Mailing Address 227 Midenhall Way		<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City Cary	State NC	Zip Code 27513
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.108251
Name of Employer BCBSNC		Occupation SVP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1538.40"/>	
		Amount of Each Receipt this Period <input type="text" value="192.30"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="439.86"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 150
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. James Wilson		Date of Receipt
Mailing Address 227 Midenhall Way		M M M / D D D / Y Y Y Y Y Y 05 / 02 / 2014
City	State	Zip Code
Cary	NC	27513
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.108398
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		192.30
Name of Employer	Occupation	
BCBSNC	SVP	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	1730.70	

Full Name (Last, First, Middle Initial) B. Mr. James Wilson		Date of Receipt
Mailing Address 227 Midenhall Way		M M M / D D D / Y Y Y Y Y Y 05 / 16 / 2014
City	State	Zip Code
Cary	NC	27513
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.108532
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		192.30
Name of Employer	Occupation	
BCBSNC	SVP	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	1923.00	

Full Name (Last, First, Middle Initial) C. Mr. James Wilson		Date of Receipt
Mailing Address 227 Midenhall Way		M M M / D D D / Y Y Y Y Y Y 05 / 30 / 2014
City	State	Zip Code
Cary	NC	27513
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.108659
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		192.30
Name of Employer	Occupation	
BCBSNC	SVP	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	2115.30	

SUBTOTAL of Receipts This Page (optional).....▶	576.90
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 143 OF 150
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Mr. James Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 227 Midenhall Way
 City Cary State NC Zip Code 27513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2307.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : SA11AI.108787
 Amount of Each Receipt this Period
 192.30

B. Mr. James Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 227 Midenhall Way
 City Cary State NC Zip Code 27513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2499.90

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : SA11AI.108915
 Amount of Each Receipt this Period
 192.30

C. Kenneth Wright
 Full Name (Last, First, Middle Initial)
 Mailing Address 618 S. Wingate Dr.
 City Wake Forest State NC Zip Code 27587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 298.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2014
Transaction ID : SA11AI.108123
 Amount of Each Receipt this Period
 44.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 428.60
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 144 OF 150
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Kenneth Wright
 Full Name (Last, First, Middle Initial)
 Mailing Address 618 S. Wingate Dr.
 City Wake Forest State NC Zip Code 27587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2014
Transaction ID : SA11AI.108253
 Amount of Each Receipt this Period
 44.00

B. Kenneth Wright
 Full Name (Last, First, Middle Initial)
 Mailing Address 618 S. Wingate Dr.
 City Wake Forest State NC Zip Code 27587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2014
Transaction ID : SA11AI.108400
 Amount of Each Receipt this Period
 44.00

C. Kenneth Wright
 Full Name (Last, First, Middle Initial)
 Mailing Address 618 S. Wingate Dr.
 City Wake Forest State NC Zip Code 27587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2014
Transaction ID : SA11AI.108534
 Amount of Each Receipt this Period
 44.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 132.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 145 OF 150
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Kenneth Wright
 Full Name (Last, First, Middle Initial)
 Mailing Address 618 S. Wingate Dr.
 City Wake Forest State NC Zip Code 27587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 474.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : SA11AI.108661
 Amount of Each Receipt this Period
 44.00

B. Kenneth Wright
 Full Name (Last, First, Middle Initial)
 Mailing Address 618 S. Wingate Dr.
 City Wake Forest State NC Zip Code 27587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 518.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : SA11AI.108789
 Amount of Each Receipt this Period
 44.00

C. Kenneth Wright
 Full Name (Last, First, Middle Initial)
 Mailing Address 618 S. Wingate Dr.
 City Wake Forest State NC Zip Code 27587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 562.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : SA11AI.108917
 Amount of Each Receipt this Period
 44.00

SUBTOTAL of Receipts This Page (optional).....▶	132.00
TOTAL This Period (last page this line number only).....▶	35708.96

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial)

A. Phil Jr Berger

Mailing Address 402 Greenway Dr

City Eden State NC Zip Code 27288

Purpose of Disbursement contribution

Candidate Name

Phil Jr Berger

Office Sought: House Senate President

State: NC District:

Disbursement For: 2014
 Primary General
 Other (specify) Runoff

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2014

Transaction ID : SB23.108268

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Hon. Richard M. Burr

Mailing Address P.O. Box 5928

City Winston-Salem State NC Zip Code 27113

Purpose of Disbursement contribution

Candidate Name

Hon. Richard M. Burr

Office Sought: House Senate President

State: NC District: 05

Disbursement For: 2016
 Primary General
 Other (specify) Runoff

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2014

Transaction ID : SB23.108258

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For:
 Primary General
 Other (specify) Runoff

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

3000.00

3000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial)

A. Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Date of Disbursement

Mailing Address P.O. Box 2291

M M M	/	D D D	/	Y Y Y Y Y
04		11		2014

City State Zip Code
Durham NC 27702

Transaction ID : SB29.108257

Purpose of Disbursement contribution

Amount of Each Disbursement this Period

Candidate Name
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Category/Type

3500.00

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Date of Disbursement

Mailing Address P.O. Box 2291

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

City State Zip Code
Durham NC 27702

Transaction ID : SB29.108269

Purpose of Disbursement contribution

Amount of Each Disbursement this Period

Candidate Name
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Category/Type

4000.00

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Ben Clark

Date of Disbursement

Mailing Address 603 E Lake Ridge Rd

M M M	/	D D D	/	Y Y Y Y Y
04		11		2014

City State Zip Code
Raeford, NC 28376

Transaction ID : SB29.108254

Purpose of Disbursement contribution

Amount of Each Disbursement this Period

Candidate Name
Ben Clark

Category/Type

1000.00

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

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

8500.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial)

A. Wayne Goodwin

Mailing Address 100 Adele Dr.

City Hamlet State NC Zip Code 28345

Purpose of Disbursement contribution

Candidate Name

Wayne Goodwin

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2014

Transaction ID : SB29.108259

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Susi Hamilton

Mailing Address 206 Nun St

City Wilmington State NC Zip Code 28401

Purpose of Disbursement contribution

Candidate Name

Susi Hamilton

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2014

Transaction ID : SB29.108265

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

C. Darren Jackson

Mailing Address 1525 Crikett Rd

City Raleigh State NC Zip Code 27610

Purpose of Disbursement contribution

Candidate Name

Darren Jackson

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NC District:

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2014

Transaction ID : SB29.108266

Amount of Each Disbursement this Period

750.00

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

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

3500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial)

A. NC House Democratic Committee

Mailing Address

City State Zip Code

Purpose of Disbursement
contribution

Candidate Name

NC House Democratic Committee

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		12		2014

Transaction ID : SB29.108263

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. NC House Republican Committee

Mailing Address

City State Zip Code

Purpose of Disbursement
contribution

Candidate Name

NC House Republican Committee

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		12		2014

Transaction ID : SB29.108264

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. NC Republican Senate Committee

Mailing Address

City State Zip Code

Purpose of Disbursement
contribution

Candidate Name

NC Republican Senate Committee

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		12		2014

Transaction ID : SB29.108262

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial)

A. NC Senate Committee

Mailing Address

City State Zip Code

Purpose of Disbursement contribution

Candidate Name

NC Senate Committee

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		12		2014

Transaction ID : SB29.108260

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Republicans Women's Caucus

Mailing Address 1506 Hillsborough St

City Raleigh State NC Zip Code 27605

Purpose of Disbursement contribution

Candidate Name

Republican Women's Caucus

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		12		2014

Transaction ID : SB29.108267

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Mike Woodard

Mailing Address 2009 Woodrow St

City Durham State NC Zip Code 27705

Purpose of Disbursement contribution

Candidate Name

Mike Woodard

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		11		2014

Transaction ID : SB29.108256

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

18000.00
