

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

Blue Cross Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		24741.78
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	7865.28									
(c) Total Receipts (from Line 19)	20552.00	48135.50								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	28417.28	72877.28								
7. Total Disbursements (from Line 31)	7850.00	52310.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	20567.28	20567.28								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	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 Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

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)	18953.00	32809.00
(ii) Unitemized	1599.00	15326.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	20552.00	48135.50
(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)	20552.00	48135.50
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 Transfer (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))	20552.00	48135.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	20552.00	48135.50

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	3500.00	7000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	4350.00	43810.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	7850.00	52310.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7850.00	52310.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	20552.00	48135.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20552.00	48135.50
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 / 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be 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 Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A.	Full Name (Last, First, Middle Initial) Frank Apostolico	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 113 Pleasant Vista Drive	Transaction ID: SA11AI.5802
	City State Zip Code Clarks Summit PA 18411	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. C	Individual Contribution
Name of Employer Blue Cross of NEPA	Occupation Board Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

B.	Full Name (Last, First, Middle Initial) Mary Bartakovits	Date of Receipt MM / DD / YYYY 11 / 12 / 2010
	Mailing Address 19 N. Main St.	Transaction ID: SA11AI.5646
	City State Zip Code Wilkes-Barre PA 18711	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	Individual Contribution
Name of Employer Blue Cross of Northeastern PA	Occupation Director, Claims Administration	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	

C.	Full Name (Last, First, Middle Initial) Paul Canevari	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address RR 5 Box 5534	Transaction ID: SA11AI.5803
	City State Zip Code Kunkletown PA 18058	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. C	Individual Contribution
Name of Employer Blue Cross of NEPA	Occupation Board Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional)	▶	2460.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 28
	<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 Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A.	Full Name (Last, First, Middle Initial) Denise S Cesare		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 1 2 / 2 0 1 0
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5652
Name of Employer Blue Cross of NEPA		Occupation President & CEO	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 ▼ 3105.00	<input type="text"/> 540.00
Individual Contribution			

B.	Full Name (Last, First, Middle Initial) John Comerford		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 1 2 / 2 0 1 0
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5654
Name of Employer Blue Cross of Northeastern PA		Occupation Regional Sales Director	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 ▼ 575.00	<input type="text"/> 100.00
Individual Contribution			

C.	Full Name (Last, First, Middle Initial) Michele Corbett		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 1 2 / 2 0 1 0
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5655
Name of Employer Blue Cross of Northeastern PA		Occupation Corporate Counsel	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 ▼ 230.00	<input type="text"/> 40.00
Individual Contribution			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 680.00
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 8 / 28
	<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 Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A.

Full Name (Last, First, Middle Initial)
Stacey Crock-Uzupis

Mailing Address 19 N. Main Street

City Wilkes-Barre State PA Zip Code 18711

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

Name of Employer Blue Cross of Northeastern PA Occupation Regional Sales Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 12 / 2010

Transaction ID: SA11AI.5658

Amount of Each Receipt this Period 80.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)
Celeste Curley

Mailing Address 19 N. Main Street

City Wilkes-Barre State PA Zip Code 18711

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

Name of Employer Blue Cross of Northeastern PA Occupation Sr. Director, Product Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 12 / 2010

Transaction ID: SA11AI.5659

Amount of Each Receipt this Period 40.00

Individual Contribution

C.

Full Name (Last, First, Middle Initial)
Russell D'Elia

Mailing Address 19 N. Main Street

City Wilkes-Barre State PA Zip Code 18711

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

Name of Employer Blue Cross of Northeastern PA Occupation Manager, Enrollment and Billing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt 11 / 12 / 2010

Transaction ID: SA11AI.5662

Amount of Each Receipt this Period 60.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional) ▶ 180.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 28
	<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 Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A.	Full Name (Last, First, Middle Initial) Christopher Decker	Date of Receipt MM / DD / YYYY 11 / 12 / 2010
	Mailing Address 19 N. Main Street	Transaction ID: SA11AI.5661
	City State Zip Code Wilkes-Barre PA 18711	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	Individual Contribution
Name of Employer Blue Cross of Northeastern PA	Occupation Corporate Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

B.	Full Name (Last, First, Middle Initial) Mark DeStefano	Date of Receipt MM / DD / YYYY 11 / 12 / 2010
	Mailing Address 70 N. Main Street	Transaction ID: SA11AI.5800
	City State Zip Code Wilkes-Barre PA 18701	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	Individual Contribution
Name of Employer AllOne Health Group	Occupation Chief Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1440.00	

C.	Full Name (Last, First, Middle Initial) Mary Elbonne	Date of Receipt MM / DD / YYYY 10 / 01 / 2010
	Mailing Address 19 N. Main Street	Transaction ID: SA11AI.5667
	City State Zip Code Wilkes-Barre PA 18711	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	Individual Contribution
Name of Employer Blue Cross of Northeastern PA	Occupation Manager, Member Compliance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	▶	200.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 28
	<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 Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A.	Full Name (Last, First, Middle Initial) William Farrell		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 2 / 2 0 1 0
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5669
Name of Employer Blue Cross of Northeastern PA		Occupation Senior VP, Finance	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"/> 920.00	<input type="text"/> 160.00
			Individual Contribution

B.	Full Name (Last, First, Middle Initial) Thomas Fjelseth		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 2 / 2 0 1 0
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5670
Name of Employer Blue Cross of Northeastern PA		Occupation VP, Human Resources	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"/> 230.00	<input type="text"/> 40.00
			Individual Contribution

C.	Full Name (Last, First, Middle Initial) Suzanne Fletcher		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 2 / 2 0 1 0
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5671
Name of Employer Blue Cross of Northeastern PA		Occupation VP, Finance and Purchasing	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"/> 920.00	<input type="text"/> 160.00
			Individual Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 360.00
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 11 / 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A.	Full Name (Last, First, Middle Initial) John H. Graham		Date of Receipt MM / DD / YYYY 10 / 06 / 2010
	Mailing Address P.O. Box 1910		Transaction ID: SA11AI.5641
	City Kingston	State PA	Zip Code 18702
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1200.00
	Name of Employer Blue Cross of NEPA	Occupation Board Member	Individual Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00	

B.	Full Name (Last, First, Middle Initial) Debbie Granteed		Date of Receipt MM / DD / YYYY 11 / 12 / 2010
	Mailing Address 19 N. Main Street		Transaction ID: SA11AI.5679
	City Wilkes-Barre	State PA	Zip Code 18711
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
	Name of Employer Blue Cross of Northeastern PA	Occupation Manager, Member Services	Individual Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	

C.	Full Name (Last, First, Middle Initial) Maura Gribble		Date of Receipt MM / DD / YYYY 11 / 12 / 2010
	Mailing Address 19 N. Main Street		Transaction ID: SA11AI.5680
	City Wilkes-Barre	State PA	Zip Code 18711
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
	Name of Employer Blue Cross of Northeastern PA	Occupation Director, Financial Reporting	Individual Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	▶	1280.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 28
	<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 Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A.	Full Name (Last, First, Middle Initial) Nancy Guerro	Date of Receipt MM / DD / YYYY 11 / 12 / 2010
	Mailing Address 19 N. Main Street	Transaction ID: SA11AI.5683
	City State Zip Code Wilkes-Barre PA 18711	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	Individual Contribution
Name of Employer Blue Cross of Northeastern PA	Occupation Sr. Director, Claims Administration	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

B.	Full Name (Last, First, Middle Initial) Leo Hartz	Date of Receipt MM / DD / YYYY 11 / 12 / 2010
	Mailing Address 19 N. Main Street	Transaction ID: SA11AI.5687
	City State Zip Code Wilkes-Barre PA 18711	Amount of Each Receipt this Period 160.00
	FEC ID number of contributing federal political committee. C	Individual Contribution
Name of Employer Blue Cross of Northeastern PA	Occupation VP, Clinical Advocacy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 920.00	

C.	Full Name (Last, First, Middle Initial) Alan S. Hollander	Date of Receipt MM / DD / YYYY 11 / 18 / 2010
	Mailing Address 137 James Street	Transaction ID: SA11AI.5804
	City State Zip Code Kingston PA 18704	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. C	Individual Contribution
Name of Employer Blue Cross of NEPA	Occupation Board Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional)	1440.00
TOTAL This Period (last page this line number only)	

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

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

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NAME OF COMMITTEE (In Full)
Blue Cross Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A.	Full Name (Last, First, Middle Initial) Donna Kachinko		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 12 / 2010
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5693
Name of Employer Blue Cross of Northeastern PA		Occupation Manager, Claims Business Systems	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"/> 230.00	<input type="text"/> 40.00
			Individual Contribution

B.	Full Name (Last, First, Middle Initial) Kimberly Kockler		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 12 / 2010
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5698
Name of Employer Blue Cross of NEPA		Occupation Vice President, Government Affairs	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"/> 1150.00	<input type="text"/> 200.00
			Individual Contribution

C.	Full Name (Last, First, Middle Initial) Frank Koronkiewicz		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 12 / 2010
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5700
Name of Employer Blue Cross of Northeastern PA		Occupation Director, Pharmacy	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"/> 230.00	<input type="text"/> 40.00
			Individual Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 280.00
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 14 / 28
	<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 Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A.

Full Name (Last, First, Middle Initial)
Gary Lamont

Mailing Address Dogwood RR 3 Box 110

City State Zip Code
Sugarloaf PA 18249

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

Name of Employer Blue Cross of NEPA
Occupation Board Member

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.5805

Amount of Each Receipt this Period
1200.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)
Michael Lampe

Mailing Address 19 N. Main Street

City State Zip Code
Wilkes-Barre PA 18711

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

Name of Employer Blue Cross of Northeastern PA
Occupation VP Ad., Comm. & Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.5702

Amount of Each Receipt this Period
120.00

Individual Contribution

C.

Full Name (Last, First, Middle Initial)
Judy Leonard-Jones

Mailing Address 19 N. Main Street

City State Zip Code
Wilkes-Barre PA 18711

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

Name of Employer Blue Cross of NEPA
Occupation Director, Provider Performance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.5703

Amount of Each Receipt this Period
40.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional) ► **1360.00**

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 15 / 28
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A.

Full Name (Last, First, Middle Initial)
Daelene Long

Mailing Address 70 N. Main Street

City Wilkes-Barre State PA Zip Code 18701

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

Name of Employer AllOne Health Group Occupation Cincinal Operations, Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 805.00

Date of Receipt 11 / 12 / 2010
Transaction ID: SA11AI.5770
 Amount of Each Receipt this Period 140.00
 Individual Contribution

B.

Full Name (Last, First, Middle Initial)
Richard Mangan

Mailing Address 508 Old Colony Rd.

City Clarks Summit State PA Zip Code 18411

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

Name of Employer Blue Cross of NEPA Occupation Board Member

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 19 / 2010
Transaction ID: SA11AI.5806
 Amount of Each Receipt this Period 1200.00
 Individual Contribution

C.

Full Name (Last, First, Middle Initial)
Gertrude McGowan

Mailing Address 19 N. Main Street

City Wilkes-Barre State PA Zip Code 18711

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

Name of Employer Blue Cross of Northeastern PA Occupation General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 575.00

Date of Receipt 11 / 12 / 2010
Transaction ID: SA11AI.5712
 Amount of Each Receipt this Period 100.00
 Individual Contribution

SUBTOTAL of Receipts This Page (optional) ► 1440.00

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 16 / 28
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A.

Full Name (Last, First, Middle Initial)
John Menapace

Mailing Address 1012 Woodland Way

City State Zip Code
Clarks Summit PA 18411

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

Name of Employer Blue Cross of NEPA Occupation Board Member

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.5642

Amount of Each Receipt this Period
1200.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)
James Michaels

Mailing Address 19 N. Main Street

City State Zip Code
Wilkes-Barre PA 18711

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

Name of Employer Blue Cross of Northeastern PA Occupation Vice-President, IT Operation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.5713

Amount of Each Receipt this Period
60.00

Individual Contribution

C.

Full Name (Last, First, Middle Initial)
John Moses

Mailing Address 120 S. Franklin St.

City State Zip Code
Wilkes-Barre PA 18701

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

Name of Employer Blue Cross of NEPA Occupation Board Member

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.5643

Amount of Each Receipt this Period
2000.00

Individual Contribution

SUBTOTAL of Receipts This Page (optional) ► **3260.00**

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

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

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

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NAME OF COMMITTEE (In Full)
Blue Cross Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A.	Full Name (Last, First, Middle Initial) Matthew O'Donnell		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 1 2 / 2 0 1 0
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5721
Name of Employer Blue Cross of Northeastern PA		Occupation Manager, Regulatory Affairs	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 ▼ 465.00	<input type="text"/> 85.00
			Individual Contribution

B.	Full Name (Last, First, Middle Initial) David Peters		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 1 2 / 2 0 1 0
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5724
Name of Employer Blue Cross of Northeastern PA		Occupation Manager, Facilities	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 ▼ 345.00	<input type="text"/> 60.00
			Individual Contribution

C.	Full Name (Last, First, Middle Initial) Arielle Phillips		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 1 2 / 2 0 1 0
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5727
Name of Employer Blue Cross of Northeastern PA		Occupation Government Affairs Representative	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 ▼ 287.50	<input type="text"/> 50.00
			Individual Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 195.00
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 18 / 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A.	Full Name (Last, First, Middle Initial) Theresa Piso		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 12 / 2010
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5729
Name of Employer Blue Cross of Northeastern PA		Occupation Manager, Claims Administration	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 ▼ 230.00	<input type="text"/> 40.00
			Individual Contribution

B.	Full Name (Last, First, Middle Initial) William Pivik		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 12 / 2010
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5730
Name of Employer Blue Cross of Northeastern PA		Occupation Corporate Counsel	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 ▼ 345.00	<input type="text"/> 60.00
			Individual Contribution

C.	Full Name (Last, First, Middle Initial) Donald Prescavage		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 12 / 2010
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5733
Name of Employer Blue Cross of Northeastern PA		Occupation Project Specialist, Interplan Ops	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 ▼ 230.00	<input type="text"/> 40.00
			Individual Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 140.00
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 19 / 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A.	Full Name (Last, First, Middle Initial) Brian Rinker	Date of Receipt MM / DD / YYYY 11 / 12 / 2010
	Mailing Address 19 N. Main Street	Transaction ID: SA11AI.5736
	City State Zip Code Wilkes-Barre PA 18711	Amount of Each Receipt this Period 160.00
	FEC ID number of contributing federal political committee. C	Individual Contribution
	Name of Employer Blue Cross of NEPA Occupation Senior Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 920.00	

B.	Full Name (Last, First, Middle Initial) Paul Rooney	Date of Receipt MM / DD / YYYY 11 / 10 / 2010
	Mailing Address 1538 Grampian Blvd	Transaction ID: SA11AI.5807
	City State Zip Code Williamsport PA 17701	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. C	Individual Contribution
	Name of Employer Blue Cross of NEPA Occupation Board Member Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1200.00	

C.	Full Name (Last, First, Middle Initial) Robert Ross	Date of Receipt MM / DD / YYYY 10 / 03 / 2010
	Mailing Address 1614 Nottingham Drive	Transaction ID: SA11AI.5644
	City State Zip Code Hummelstown PA 17036	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. C	Individual Contribution
	Name of Employer Blue Cross of NEPA Occupation Board Member Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1200.00	

SUBTOTAL of Receipts This Page (optional)	2560.00
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 / 28
	<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 Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A.	Full Name (Last, First, Middle Initial) Patricia Savitsky		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
	City Wilkes-Barre	State PA	Zip Code 18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5739
	Amount of Each Receipt this Period 160.00		Individual Contribution
Name of Employer Blue Cross of NEPA		Occupation VP, Corporate Assurance and Compliance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 920.00	

B.	Full Name (Last, First, Middle Initial) Stuart Segal		Date of Receipt
	Mailing Address 70 N. Main Street		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
	City Wilkes-Barre	State PA	Zip Code 18701
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5775
	Amount of Each Receipt this Period 80.00		Individual Contribution
Name of Employer Allone Health Group		Occupation Sr. VP - Integrated Health Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 460.00	

C.	Full Name (Last, First, Middle Initial) Bruce Sickel		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
	City Wilkes-Barre	State PA	Zip Code 18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5741
	Amount of Each Receipt this Period 80.00		Individual Contribution
Name of Employer Blue Cross of Northeastern PA		Occupation VP Investment Services & Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 460.00	

SUBTOTAL of Receipts This Page (optional)	320.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 28
	<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 Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A.	Full Name (Last, First, Middle Initial) Rhea Simms		Date of Receipt
	Mailing Address 740 Sutton Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 17 / 2010
	City	State	Zip Code
	Shavertown	PA	18708
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.5808
	C		Amount of Each Receipt this Period
		1000.00	
Name of Employer Blue Cross of NEPA		Occupation Board Member	Individual Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		1000.00	

B.	Full Name (Last, First, Middle Initial) Gary Solomon		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 12 / 2010
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.5743
	C		Amount of Each Receipt this Period
		60.00	
Name of Employer Blue Cross of Northeastern PA		Occupation Analyst, Network	Individual Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		345.00	

C.	Full Name (Last, First, Middle Initial) Cathy Stitzer		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 12 / 2010
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.5747
	C		Amount of Each Receipt this Period
		40.00	
Name of Employer Blue Cross of Northeastern PA		Occupation Director, Customer Experience	Individual Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		230.00	

SUBTOTAL of Receipts This Page (optional)	▶	1100.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 28
	<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 Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A.

Full Name (Last, First, Middle Initial)
Michael Stull

Mailing Address 19 N. Main Street

City Wilkes-Barre State PA Zip Code 18711

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

Name of Employer Blue Cross of Northeastern PA Occupation Executive, Major Accounts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 12 / 2010

Transaction ID: SA11AI.5748

Amount of Each Receipt this Period 40.00

Individual Contribution

B.

Full Name (Last, First, Middle Initial)
Louise-Alabre Trumm

Mailing Address 70 N. Main Street

City Wilkes-Barre State PA Zip Code 18701

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

Name of Employer AllOne Health Group Occupation Director, Customer Informatics- AllOne

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 12 / 2010

Transaction ID: SA11AI.5779

Amount of Each Receipt this Period 40.00

Individual Contribution

C.

Full Name (Last, First, Middle Initial)
Debra Tucker

Mailing Address 19 N. Main Street

City Wilkes-Barre State PA Zip Code 18711

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

Name of Employer Blue Cross of Northeastern PA Occupation Technical Specialist, Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 12 / 2010

Transaction ID: SA11AI.5753

Amount of Each Receipt this Period 40.00

Individual Contribution

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: (check only one)	PAGE 23 / 28
	<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 Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A.	Full Name (Last, First, Middle Initial) Gerald Walsh		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 2 / 2 0 1 0
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5758
Name of Employer Blue Cross of Northeastern PA		Occupation VP, Provider Advocacy	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 ▼ 460.00	<input type="text"/> 80.00
			Individual Contribution

B.	Full Name (Last, First, Middle Initial) David Warnick		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 2 / 2 0 1 0
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5759
Name of Employer Blue Cross of Northeastern PA		Occupation Sr. Manager, Software & Administration	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 ▼ 287.50	<input type="text"/> 50.00
			Individual Contribution

C.	Full Name (Last, First, Middle Initial) Keith Wasley		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 2 / 2 0 1 0
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5760
Name of Employer Blue Cross of NEPA		Occupation Dir., Admin. Services & Risk Mgmt.	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 ▼ 345.00	<input type="text"/> 60.00
			Individual Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 190.00
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 24 / 28
	<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 Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A.	Full Name (Last, First, Middle Initial) David Williams		Date of Receipt
	Mailing Address 211 Glenburn Rd.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	City	State	Zip Code
	Clarks Green	PA	18411
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5809
Name of Employer Blue Cross of NEPA		Occupation Board Member	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"/> 1200.00
			Individual Contribution

B.	Full Name (Last, First, Middle Initial) Dennis Wozniak		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 1 2 / 2 0 1 0
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5764
Name of Employer Blue Cross of Northeastern PA		Occupation Director, Enterprise PMO	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"/> 60.00
			Individual Contribution

C.	Full Name (Last, First, Middle Initial) Michael Yantis		Date of Receipt
	Mailing Address 19 N. Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 1 2 / 2 0 1 0
	City	State	Zip Code
	Wilkes-Barre	PA	18711
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5765
Name of Employer Blue Cross of NEPA		Occupation Director, Policy Management	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"/> 128.00
			Individual Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1388.00
TOTAL This Period (last page this line number only)	<input type="text"/> 18953.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 25 / 28

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

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NAME OF COMMITTEE (In Full)

Blue Cross Voice The Political Action Committee of Blue Cross of Northeastern Pe-nnsylvan

A.

Full Name (Last, First, Middle Initial)

BLUE PAC

Mailing Address PO BOX 34676

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
Transfer to Affiliated PAC

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB22.5793

Date of Disbursement

10 / 15 / 2010

Amount of Each Disbursement this Period

3500.00

SUBTOTAL of Disbursements This Page (optional)

3500.00

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 Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A.

Full Name (Last, First, Middle Initial)

ChamberPAC

Mailing Address 417 Walnut Street

City Harrisburg State PA Zip Code 17101-1902

Purpose of Disbursement Non-Federal Campaign Contribution

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.5635

Date of Disbursement

10 / 08 / 2010

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Friends of Gary Day

Mailing Address 5934 Memorial Road

City Germansville State PA Zip Code 18053

Purpose of Disbursement Non-Federal Campaign Contribution

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: PA District:

Transaction ID: SB29.5631

Date of Disbursement

10 / 01 / 2010

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Friends of Jake Corman

Mailing Address PO Box 13053

City Harrisburg State PA Zip Code 17110

Purpose of Disbursement Non-Federal Campaign Contribution

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: PA District:

Transaction ID: SB29.5637

Date of Disbursement

10 / 08 / 2010

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 Voice The Political Action Committee of Blue Cross of Northeastern Pennsylvania

A. Full Name (Last, First, Middle Initial) Friends of Todd Eachus <hr/> Mailing Address P.O. Box 2174 <hr/> City Hazleton State PA Zip Code 18201 <hr/> Purpose of Disbursement Non-Federal Campaign Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.5794 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 250.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) HRCC <hr/> Mailing Address P.O. Box 11787 <hr/> City Harrisburg State PA Zip Code 17108 <hr/> Purpose of Disbursement Non-Federal Campaign Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.5799 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 2000.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Jay Costa Jr. for State Senate <hr/> Mailing Address 814 Newport Road <hr/> City Pittsburgh State PA Zip Code 15221 <hr/> Purpose of Disbursement Non-Federal Campaign Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.5639 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

2750.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 28 / 28

<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 Voice The Political Action Committee of Blue Cross of Northeastern Pe-nnsylvan

A.

Full Name (Last, First, Middle Initial)

John Blake for Senate

Mailing Address PO Box 102

City Archbald State PA Zip Code 18403

Purpose of Disbursement
Non-Federal Campaign Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5797

Date of Disbursement

10 / 21 / 2010

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

4250.00