

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

ADDRESS (number and street) **50 Beale Street**
17-C356
 Check if different than previously reported. (ACC) **SAN FRANCISCO CA 94105**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00340364 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period / / 2016 through / / 2016

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

Signature of Treasurer Glidden, Emily, , , [Electronically Filed] Date / / 2017

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

BLUE SHIELD OF CALIFORNIA 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="2016"/>		178993.66
(b) Cash on Hand at Beginning of Reporting Period.....	113555.33	
(c) Total Receipts (from Line 19)	12548.52	161776.02
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	126103.85	340769.68
7. Total Disbursements (from Line 31).....	10024.20	224690.03
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	116079.65	116079.65
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 SHIELD OF CALIFORNIA 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).....	11240.52	120799.41
(ii) Unitemized	1308.00	38476.61
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	12548.52	159276.02
(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)	12548.52	159276.02
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	2500.00
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)).....▶	12548.52	161776.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	12548.52	161776.02

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	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.....	10000.00	224500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	24.20	190.03
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	10024.20	224690.03
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10024.20	224690.03

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	12548.52	159276.02
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12548.52	159276.02
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 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Alvarez, Tracy, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Emp #xx0661
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11Al.18720

Amount of Each Receipt this Period
20.00

Memo Item
Payroll contribution per cycle \$10.00

B. Aram, Cyrus, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee# xx8445
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11Al.18721

Amount of Each Receipt this Period
50.00

Memo Item
Payroll contribution per cycle \$25.00

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

Mailing Address Employee# xx0962
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11Al.18724

Amount of Each Receipt this Period
50.00

Memo Item
Payroll contribution per cycle \$25.00

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: (check only one)	PAGE 7 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Baker, Alison, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx7093
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11Al.18725
 Amount of Each Receipt this Period 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Baker, Terri, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx1950, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 702.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11Al.18726
 Amount of Each Receipt this Period 54.00
 Memo Item
 Payroll contribution per cycle \$27.00

C. Baldi, Phillip, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx6202
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Medical Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11Al.18729
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 8 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Balousek, Bret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx527
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18730
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Banghart, Patrick, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx5427
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Analyst
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18731
 Amount of Each Receipt this Period
 20.00
 Memo Item
 Payroll contribution per cycle \$10.00

C. Barlesi, Richard, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx3857
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18732
 Amount of Each Receipt this Period
 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	106.00
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 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Barnes, Tracy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx2076
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18733
 Amount of Each Receipt this Period
 100.00
 Memo Item
 Payroll contribution per cycle \$50.00

B. Barnhard, Christine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx7811
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Sr. Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18734
 Amount of Each Receipt this Period
 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Barnhart, Tori, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx7483
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18735
 Amount of Each Receipt this Period
 30.00
 Memo Item
 Payroll contribution per cycle \$15.00

SUBTOTAL of Receipts This Page (optional).....	166.00
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 OF 78
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Barry, Sean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx1179
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18736
 Amount of Each Receipt this Period
 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Bassett, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx2676
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18737
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Bassett, Peter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx1290
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18738
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	136.00
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 11 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Battin, David, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx4657
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18739
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll contribution per cycle \$20.00

B. Beal, Kenneth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx3608
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18740
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll contribution per cycle \$20.00

C. Bell, Ronda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx7066
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18741
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll contribution per cycle \$15.00

SUBTOTAL of Receipts This Page (optional).....	110.00
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 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Beller, Kimberly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx5254
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18742
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Bergman, Patrice, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx6395
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) 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
 12 / 31 / 2016
Transaction ID : SA11AI.18743
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Bergstrom, Melinda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx2057
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18746
 Amount of Each Receipt this Period
 40.00
 Memo Item
 Payroll contribution per cycle \$20.00

SUBTOTAL of Receipts This Page (optional).....	140.00
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 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Beuoy, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# 5248
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 12 / 31 / 2016
Transaction ID : SA11Al.18747
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Bhargava, Nitin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx4047
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 12 / 31 / 2016
Transaction ID : SA11Al.18748
 Amount of Each Receipt this Period 140.00
 Memo Item
 Payroll contribution per cycle \$70.00

C. Blakeman, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee#xx1919
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt
 12 / 31 / 2016
Transaction ID : SA11Al.18749
 Amount of Each Receipt this Period 60.00
 Memo Item
 Payroll contribution per cycle \$30.00

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 14 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Bleau, Jason, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1927
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11Al.18750
 Amount of Each Receipt this Period 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Boudreau, Theresa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx3316
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 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
 12 / 31 / 2016
Transaction ID : SA11Al.18751
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll contribution per cycle \$15.00

C. Boul, Wendy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx0289
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11Al.18752
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll contribution per cycle \$10.00

SUBTOTAL of Receipts This Page (optional).....	86.00
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 15 OF 78
	<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
-----------------------------	-----------------------------	-----------------------------

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

NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Bourn, Courtney, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address emp xx6228
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 312.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.18753

Amount of Each Receipt this Period 24.00

Memo Item
 Payroll contribution per cycle \$12.00

B. Braza, Carlo, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address emp xx1673
 50 Beale street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Senior Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.18754

Amount of Each Receipt this Period 36.00

Memo Item
 Payroll contribution per cycle \$18.00

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

Mailing Address emp xx2060
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield Occupation (for Individual) Director

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.18755

Amount of Each Receipt this Period 40.00

Memo Item
 Payroll contribution per cycle \$20.00

SUBTOTAL of Receipts This Page (optional).....	100.00
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 16 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Brizendine, Laverne A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx6076
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18756
 Amount of Each Receipt this Period 60.00
 Memo Item
 Payroll contribution per cycle \$30.00

B. Brooks, Nicole, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx7380
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18757
 Amount of Each Receipt this Period 60.00
 Memo Item
 Payroll contribution per cycle \$30.00

C. Brown, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp #xx0647
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18758
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	170.00
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 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Brown, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx9004, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 822.64

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11Al.18759
 Amount of Each Receipt this Period 63.28
 Memo Item
 Payroll contribution per cycle \$31.64

B. Campagna, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3045 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11Al.18761
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Casserly, Elena, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx6221 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11Al.18766
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	163.28
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 18 OF 78
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Castanon, Lori, , ,

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

Mailing Address Employee# xx6314
50 Beale Street

City San Francisco	State CA	Zip Code 94105
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) 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
12	/	31	/	2016

Transaction ID : SA11AI.18767

Amount of Each Receipt this Period
20.00

Memo Item
Payroll contribution per cycle \$10.00

B. Casten, Kristen, , ,

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

Mailing Address Employee# xx8146
50 Beale Street

City San Francisco	State CA	Zip Code 94105
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) 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
12	/	31	/	2016

Transaction ID : SA11AI.18768

Amount of Each Receipt this Period
20.00

Memo Item
Payroll contribution per cycle \$10.00

C. Casulo, Adriel, , ,

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

Mailing Address Employee# xx6492
50 Beale Street

City San Francisco	State CA	Zip Code 94105
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Director
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
468.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2016

Transaction ID : SA11AI.18769

Amount of Each Receipt this Period
36.00

Memo Item
Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	76.00
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 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Cates, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8886
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.18770
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Cemo, Summer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3503
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.18771
 Amount of Each Receipt this Period 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Chadwell, George, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx0628
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 371.28

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.18773
 Amount of Each Receipt this Period 28.56
 Memo Item
 Payroll contribution per cycle \$14.28

SUBTOTAL of Receipts This Page (optional).....	114.56
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 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Chasin, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx8020
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3130.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18774
 Amount of Each Receipt this Period
 250.00
 Memo Item
 Payroll contribution per cycle \$125.00

B. Chayt, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3401
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Assoc. General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18775
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Chiarodit, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx7088
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18776
 Amount of Each Receipt this Period
 30.00
 Memo Item
 Payroll contribution per cycle \$15.00

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 21 OF 78
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Chiu, Vanessa, , ,

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

Mailing Address Employee# xx1316
50 Beale Street

City San Francisco	State CA	Zip Code 94105
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Shield of California	Occupation (for Individual) Manager
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2016

Transaction ID : SA11AI.18777

Amount of Each Receipt this Period
36.00

Memo Item
Payroll contribution per cycle \$18.00

B. Chong, John, , ,

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

Mailing Address Employee # xx4168
50 Beale Street

City San Francisco	State CA	Zip Code 94105
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Director
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2016

Transaction ID : SA11AI.18778

Amount of Each Receipt this Period
50.00

Memo Item
Payroll contribution per cycle \$25.00

C. Ciufu, Denise, , ,

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

Mailing Address emp xx4063, 50 Beale Street

City San Francisco	State CA	Zip Code 94105
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Shield	Occupation (for Individual) Director
--	---

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
12 / 31 / 2016

Transaction ID : SA11AI.18780

Amount of Each Receipt this Period
30.00

Memo Item
Payroll contribution per cycle \$15.00

SUBTOTAL of Receipts This Page (optional).....	116.00
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 OF 78
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Clark, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx3881
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18781
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll contribution per cycle \$10.00

B. Crawley, Bryan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx7742
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) 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
 12 / 31 / 2016
Transaction ID : SA11AI.18784
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll contribution per cycle \$10.00

C. Dahlem, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx1109
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18785
 Amount of Each Receipt this Period 220.00
 Memo Item
 Payroll contribution per cycle \$110.00

SUBTOTAL of Receipts This Page (optional).....	260.00
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 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Dailey, Carla M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx0442
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18786
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Datcher, Shannon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx7287
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18787
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. DeBartoli, Jodie, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1900
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18788
 Amount of Each Receipt this Period 24.00
 Memo Item
 Payroll contribution per cycle \$12.00

SUBTOTAL of Receipts This Page (optional).....	124.00
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 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. DeBerry, Andrea, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx1594
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18789
 Amount of Each Receipt this Period
 60.00
 Memo Item
 Payroll contribution per cycle \$30.00

B. Dehart, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx0621
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Consultant Lead
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18790
 Amount of Each Receipt this Period
 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Devine, Renee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx0495
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18791
 Amount of Each Receipt this Period
 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

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: (check only one)	PAGE 25 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Dharmer, Rajkumar, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016 Transaction ID : SA11AI.18792
Mailing Address Employee# xx8261 50 Beale Street		Amount of Each Receipt this Period 50.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$25.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Dietz, Megan-Bria, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016 Transaction ID : SA11AI.18793
Mailing Address Employee # xx3092 50 Beale Street		Amount of Each Receipt this Period 10.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$5.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Donohue, Tina, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016 Transaction ID : SA11AI.18794
Mailing Address emp xx2241 50 Beale Street		Amount of Each Receipt this Period 20.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$10.00
Name of Employer (for Individual) Blue Shield of California	Occupation (for Individual) Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 26 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Dutra, Cynthia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3097
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18797
 Amount of Each Receipt this Period 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Edwards, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3066
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18798
 Amount of Each Receipt this Period 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Eisenstein, Marc, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx7084
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18799
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll contribution per cycle \$10.00

SUBTOTAL of Receipts This Page (optional).....	92.00
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 27 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Ejuwa, Jacqueline, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx3113
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 962.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18800
 Amount of Each Receipt this Period 74.00
 Memo Item
 Payroll contribution per cycle \$37.00

B. Elliott, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx5549
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18801
 Amount of Each Receipt this Period 90.00
 Memo Item
 Payroll contribution per cycle \$45.00

C. Ellis, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx2404
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) General Counsel
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18802
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll contribution per cycle \$20.00

SUBTOTAL of Receipts This Page (optional).....	204.00
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 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Engelbert, Dale, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee #xx2109
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
342.00

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.18804

Amount of Each Receipt this Period
36.00

Memo Item
Payroll contribution per cycle \$18.00

B. Epstein, Thomas, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address emp xx0249
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Vice President, Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2470.00

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.18805

Amount of Each Receipt this Period
190.00

Memo Item
Payroll contribution per cycle \$95.00

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

Mailing Address emp xx2319
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
451.00

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.18806

Amount of Each Receipt this Period
40.00

Memo Item
Payroll contribution per cycle \$20.00

SUBTOTAL of Receipts This Page (optional).....	266.00
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 29 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Fields, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3507
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) EVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4992.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18807
 Amount of Each Receipt this Period
 384.00
 Memo Item
 Payroll contribution per cycle \$192.00

B. Fisher, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1784
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18808
 Amount of Each Receipt this Period
 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Flaum, Amanda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx1242
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) 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
 12 / 31 / 2016
Transaction ID : SA11AI.18809
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	470.00
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 30 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Florez, Hugo, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1071
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18810
 Amount of Each Receipt this Period
 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Fogelman, Carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx2239
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 451.62

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18811
 Amount of Each Receipt this Period
 34.74
 Memo Item
 Payroll contribution per cycle \$17.37

C. Fortino, Dawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8687
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18812
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	120.74
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 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Gaines, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx4561
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18813
 Amount of Each Receipt this Period
 20.00
 Memo Item
 Payroll contribution per cycle \$10.00

B. Gannon, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx2952
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18814
 Amount of Each Receipt this Period
 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Gebhart, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx7244
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18815
 Amount of Each Receipt this Period
 60.00
 Memo Item
 Payroll contribution per cycle \$30.00

SUBTOTAL of Receipts This Page (optional).....	116.00
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 32 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Gensch, Devin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx4081
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 728.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18816
 Amount of Each Receipt this Period 56.00
 Memo Item
 Payroll contribution per cycle \$28.00

B. Gibson Pace, Diana, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx0252
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18817
 Amount of Each Receipt this Period 70.00
 Memo Item
 Payroll contribution per cycle \$35.00

C. Gonzales, Celia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx5859
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18818
 Amount of Each Receipt this Period 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	162.00
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 33 OF 78
	<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
-----------------------------	-----------------------------	-----------------------------

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

NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Gorakshakar, Poonam, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee# xx1791
 50 Beale Street

City San Francisco	State CA	Zip Code 94105
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Director
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 266.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016

Transaction ID : SA11AI.18819

Amount of Each Receipt this Period
 24.00

Memo Item
 Payroll contribution per cycle \$12.00

B. Gregg, Christy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address emp xx2233
 50 Beale Street

City San Francisco	State CA	Zip Code 94105
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Shield of California	Occupation (for Individual) Manager
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016

Transaction ID : SA11AI.18820

Amount of Each Receipt this Period
 50.00

Memo Item
 Payroll contribution per cycle \$25.00

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

Mailing Address Employee# xx8766
 50 Beale Street

City San Francisco	State CA	Zip Code 94105
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Manager
--	--

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
 12 / 31 / 2016

Transaction ID : SA11AI.18821

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll contribution per cycle \$10.00

SUBTOTAL of Receipts This Page (optional).....	94.00
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 34 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Guerridos, Raul E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx2698
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18822
 Amount of Each Receipt this Period
 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Gutzman, Roger, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx1911
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Analyst
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18824
 Amount of Each Receipt this Period
 20.00
 Memo Item
 Payroll contribution per cycle \$10.00

C. Harmatz, Jill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx5510
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18825
 Amount of Each Receipt this Period
 24.00
 Memo Item
 Payroll contribution per cycle \$12.00

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 35 OF 78
	<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"/>	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Herrera, Ergueen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx2968
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.18828
 Amount of Each Receipt this Period 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Hilty, Larry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx9314
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.18830
 Amount of Each Receipt this Period 70.00
 Memo Item
 Payroll contribution per cycle \$35.00

C. Ho, Judith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx9612
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.18831
 Amount of Each Receipt this Period 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....▶ 142.00
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 78
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Ho, Mailin, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016 Transaction ID : SA11AI.18832
Mailing Address Employee# xx3424 50 Beale Street		Amount of Each Receipt this Period 50.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$25.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hoffman, Helena, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016 Transaction ID : SA11AI.18835
Mailing Address emp xx5671 50 Beale Street		Amount of Each Receipt this Period 22.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$11.00
Name of Employer (for Individual) Blue Shield of California	Occupation (for Individual) Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 286.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Hopkins, Kimberly, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016 Transaction ID : SA11AI.18836
Mailing Address Employee# xx8896 50 Beale Street		Amount of Each Receipt this Period 20.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$10.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional).....	92.00
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 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Horan, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx6453
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) 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
 12 / 31 / 2016
Transaction ID : SA11AI.18837
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll contribution per cycle \$10.00

B. Hornbacher, Stanford, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx6615
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of Callifornia Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18838
 Amount of Each Receipt this Period 45.00
 Memo Item
 Payroll contribution per cycle \$22.50

C. Huber, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx7445
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Sr. Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18839
 Amount of Each Receipt this Period 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	101.00
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 38 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Hurd, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx6366
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18840
 Amount of Each Receipt this Period 60.00
 Memo Item
 Payroll contribution per cycle \$30.00

B. Iwasaki, Jeff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3419
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18843
 Amount of Each Receipt this Period 90.00
 Memo Item
 Payroll contribution per cycle \$45.00

C. Jacobs, Seth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx6574
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Sr. VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18844
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll contribution per cycle \$75.00

SUBTOTAL of Receipts This Page (optional).....	300.00
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 39 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Jensen-Badaa, Carrie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1601
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18845
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Jmath, Pooja, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18846
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Johns, Lorie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx5447
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18847
 Amount of Each Receipt this Period
 45.00
 Memo Item
 Payroll contribution per cycle \$22.50

SUBTOTAL of Receipts This Page (optional).....	145.00
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 40 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Johnson, Trudy, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx4042
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) 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
 12 / 31 / 2016
Transaction ID : SA11AI.18848
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll contribution per cycle \$10.00

B. Johnson-Saville, Michelle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx2920
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18849
 Amount of Each Receipt this Period 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Kallan, David, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx6424
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 214.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18850
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll contribution per cycle \$10.00

SUBTOTAL of Receipts This Page (optional).....▶ 76.00
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 41 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Kalyan, Krishna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3135
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18851
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Karrobi, Syng, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx4555
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18854
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Kawamoto, Allison, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx4997
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 398.06

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18855
 Amount of Each Receipt this Period 30.62
 Memo Item
 Payroll contribution per cycle \$15.31

SUBTOTAL of Receipts This Page (optional).....	130.62
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 42 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Khemani, Pradip, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx7222
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18858
 Amount of Each Receipt this Period 70.00
 Memo Item
 Payroll contribution per cycle \$35.00

B. Kibler, Tina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx5267
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1696.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18859
 Amount of Each Receipt this Period 134.00
 Memo Item
 Payroll contribution per cycle \$67.00

C. Kiefer, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx8277
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18860
 Amount of Each Receipt this Period 120.00
 Memo Item
 Payroll contribution per cycle \$60.00

SUBTOTAL of Receipts This Page (optional).....	324.00
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 43 OF 78
(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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Kim, Keith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx5487
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11Al.18861
 Amount of Each Receipt this Period 70.00
 Memo Item
 Payroll contribution per cycle \$35.00

B. Kim, Yun, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx9394
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 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
 12 / 31 / 2016
Transaction ID : SA11Al.18862
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll contribution per cycle \$15.00

C. Knudsen, Amanda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3382
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Assoc. General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11Al.18864
 Amount of Each Receipt this Period 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....▶ 136.00
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 44 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Lam, Nora, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx5642
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.18865
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll contribution per cycle \$15.00

B. Langum, Rebecca, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx2976
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.18866
 Amount of Each Receipt this Period 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Lewis, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 Beale Street
 employee #xx2384
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.18867
 Amount of Each Receipt this Period 45.00
 Memo Item
 Payroll contribution per cycle \$22.50

SUBTOTAL of Receipts This Page (optional).....▶	111.00
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 45 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Liu, Ruth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8903
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11Al.18870
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Luippold, Analisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx6832
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11Al.18875
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Lum, Alison, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8386
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11Al.18876
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

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 46 OF 78
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Lynaugh, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx9411
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18877
 Amount of Each Receipt this Period
 80.00
 Memo Item
 Payroll contribution per cycle \$40.00

B. Manning, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3338
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18881
 Amount of Each Receipt this Period
 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Markovich, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx6510
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18883
 Amount of Each Receipt this Period
 200.00
 Memo Item
 Payroll contribution per cycle \$100.00

SUBTOTAL of Receipts This Page (optional).....	316.00
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 47 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Marshall, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8149
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18884
 Amount of Each Receipt this Period 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Mccoy, Molly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3480
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18885
 Amount of Each Receipt this Period 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. McFarland, Shelley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx1236, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 269.88

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18886
 Amount of Each Receipt this Period 20.76
 Memo Item
 Payroll contribution per cycle \$10.38

SUBTOTAL of Receipts This Page (optional).....	92.76
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: (check only one)	PAGE 48 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. McNeil, Frances, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx6964
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Counsel Lead
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18887
 Amount of Each Receipt this Period
 20.00
 Memo Item
 Payroll contribution per cycle \$10.00

B. Meinhofer, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8066
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18888
 Amount of Each Receipt this Period
 30.00
 Memo Item
 Payroll contribution per cycle \$15.00

C. Minarcin, Andrea, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 Beale Street
 employee #xx4753
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18889
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
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 49 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Moore, Jaynene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx2572
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.18892
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll contribution per cycle \$15.00

B. Morimoto, Stephanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx0769
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Assoc. General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.18893
 Amount of Each Receipt this Period 90.00
 Memo Item
 Payroll contribution per cycle \$45.00

C. Mullany, Kristin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx8111
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Chief of Staff
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.18896
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....▶ 170.00
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 50 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Murphy, Jon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx2151
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.12

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.18897
 Amount of Each Receipt this Period 49.24
 Memo Item
 Payroll contribution per cycle \$24.62

B. Murray, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1032
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1560.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.18898
 Amount of Each Receipt this Period 120.00
 Memo Item
 Payroll contribution per cycle \$60.00

C. Nye, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3144
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1310.00

Date of Receipt 12 / 31 / 2016
Transaction ID : SA11AI.18901
 Amount of Each Receipt this Period 110.00
 Memo Item
 Payroll contribution per cycle \$55.00

SUBTOTAL of Receipts This Page (optional).....▶ 279.24
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 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. O'Hara, Mary, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016
Mailing Address Employee # xx0977 50 Beale Street		Transaction ID : SA11AI.18902
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 140.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) SVP	<input type="checkbox"/> Memo Item Payroll contribution per cycle \$70.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1820.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. O'Neil, Michael, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016
Mailing Address Employee# xx8692 50 Beale Street		Transaction ID : SA11AI.18903
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) VP	<input type="checkbox"/> Memo Item Payroll contribution per cycle \$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. O'Neill, Timothy, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016
Mailing Address Employee# xx8459 50 Beale Street		Transaction ID : SA11AI.18904
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Director	<input type="checkbox"/> Memo Item Payroll contribution per cycle \$25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional).....	290.00
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 52 OF 78
(check only one)

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

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

NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Ocepek, David, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee# xx1761
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.18905

Amount of Each Receipt this Period
50.00

Memo Item
Payroll contribution per cycle \$25.00

B. Odette, Terese, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee# xx7096
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.18906

Amount of Each Receipt this Period
50.00

Memo Item
Payroll contribution per cycle \$25.00

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

Mailing Address Employee #xx6534
50 Beale St.,

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Phone Representative

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.18908

Amount of Each Receipt this Period
20.00

Memo Item
Payroll contribution per cycle \$10.00

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: (check only one)	PAGE 53 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Panek, William, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016 Transaction ID : SA11AI.18911
Mailing Address emp xx8535 50 Beale Street		Amount of Each Receipt this Period 50.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$25.00
Name of Employer (for Individual) Blue Shield of California	Occupation (for Individual) Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Papouchian-Kulinski, Armine, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016 Transaction ID : SA11AI.18912
Mailing Address Employee #xx5680 50 Beale St.,		Amount of Each Receipt this Period 80.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$40.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1040.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Pearce, Jeff, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016 Transaction ID : SA11AI.18916
Mailing Address Employee# xx0492 50 Beale Street		Amount of Each Receipt this Period 30.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$15.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Sr. Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional).....	160.00
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 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Poon, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx6412
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18918
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Prather, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx5817
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18919
 Amount of Each Receipt this Period
 20.00
 Memo Item
 Payroll contribution per cycle \$10.00

C. Prettyman, Daniel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx5418
 50 Beale St.
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) VP
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18920
 Amount of Each Receipt this Period
 30.00
 Memo Item
 Payroll contribution per cycle \$15.00

SUBTOTAL of Receipts This Page (optional).....	100.00
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 55 OF 78
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Ramey, Alison, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx2396
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18921
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll contribution per cycle \$20.00

B. Raongthum, Anchulee J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx6257
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18922
 Amount of Each Receipt this Period 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Rapp, Jordan, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx6171
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18923
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll contribution per cycle \$10.00

SUBTOTAL of Receipts This Page (optional).....	96.00
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 56 OF 78
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Rau, Carsten, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016 Transaction ID : SA11AI.18924
Mailing Address Employee # xx3095 50 Beale Street		Amount of Each Receipt this Period 50.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$25.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Richmond, Marc, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016 Transaction ID : SA11AI.18925
Mailing Address Employee# xx6543 50 Beale Street		Amount of Each Receipt this Period 30.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$15.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Rinaldi, Karen, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016 Transaction ID : SA11AI.18926
Mailing Address emp xx1645 50 Beale Street		Amount of Each Receipt this Period 27.78
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$13.89
Name of Employer (for Individual) Blue Shield of California	Occupation (for Individual) Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 361.14	

SUBTOTAL of Receipts This Page (optional).....	107.78
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 57 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Robinson, Brett, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx7680
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18929
 Amount of Each Receipt this Period
 40.00
 Memo Item
 Payroll contribution per cycle \$20.00

B. Roehm, Michael, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx7259
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18930
 Amount of Each Receipt this Period
 30.00
 Memo Item
 Payroll contribution per cycle \$15.00

C. Rumsey, Suzanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1333
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18931
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

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 58 OF 78
	(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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Russell, Cynthia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx0497
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18932
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Saadzo, Lina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx5649
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 670.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18933
 Amount of Each Receipt this Period
 70.00
 Memo Item
 Payroll contribution per cycle \$35.00

C. Safran, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx9164, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18934
 Amount of Each Receipt this Period
 40.00
 Memo Item
 Payroll contribution per cycle \$20.00

SUBTOTAL of Receipts This Page (optional).....	160.00
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 59 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Salow, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 Beale Street
 employee # xx5516
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18936
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Sanchez, Luis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx0908
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18937
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll contribution per cycle \$20.00

C. Sasaki, Lori, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx7711
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18938
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll contribution per cycle \$15.00

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: (check only one)	PAGE 60 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Satterwhaite, Lauri, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address emp xx9223
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 520.00

Date of Receipt
 12 / 31 / 2016
Transaction ID : SA11AI.18939

Amount of Each Receipt this Period
 40.00

Memo Item
 Payroll contribution per cycle \$20.00

B. Schulz, Shayna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee # xx3526
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1170.00

Date of Receipt
 12 / 31 / 2016
Transaction ID : SA11AI.18941

Amount of Each Receipt this Period
 90.00

Memo Item
 Payroll contribution per cycle \$45.00

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

Mailing Address Employee # xx0637
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 468.00

Date of Receipt
 12 / 31 / 2016
Transaction ID : SA11AI.18942

Amount of Each Receipt this Period
 36.00

Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 166.00

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 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Sedo, Sandra, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx5441
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18943
 Amount of Each Receipt this Period
 20.00
 Memo Item
 Payroll contribution per cycle \$10.00

B. Sharp, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8291
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18945
 Amount of Each Receipt this Period
 22.00
 Memo Item
 Payroll contribution per cycle \$11.00

C. Shaw, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx1283
 50 Beale street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Sr. Consultant
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18948
 Amount of Each Receipt this Period
 30.00
 Memo Item
 Payroll contribution per cycle \$15.00

SUBTOTAL of Receipts This Page (optional).....▶	72.00
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 62 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Sheils, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx5617
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18949
 Amount of Each Receipt this Period 90.00
 Memo Item
 Payroll contribution per cycle \$45.00

B. Shen, Danny, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx2954
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18951
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Shih, Michelle, Y, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx6919
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18953
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	190.00
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 78
	<input checked="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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE
--	--

A. Shivinsky, Stephen, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016 Transaction ID : SA11AI.18954
Mailing Address Employee# xx8369 50 Beale Street		Amount of Each Receipt this Period 90.00
City San Francisco	State CA	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$45.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1170.00	

B. Shunglu, Anju, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016 Transaction ID : SA11AI.18955
Mailing Address Employee# xx2605 50 Beale Street		Amount of Each Receipt this Period 20.00
City San Francisco	State CA	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$10.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C. Smith, Jeffrey, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016 Transaction ID : SA11AI.18956
Mailing Address Employee# xx7922 50 Beale Street		Amount of Each Receipt this Period 50.00
City San Francisco	State CA	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$25.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional).....	160.00
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 64 OF 78
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Solomon, Gilbert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx1700
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1199.90

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18957
 Amount of Each Receipt this Period 92.30
 Memo Item
 Payroll contribution per cycle \$46.15

B. Sommercamp, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3636
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18958
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Spector, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx4420, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1682.12

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18959
 Amount of Each Receipt this Period 138.24
 Memo Item
 Payroll contribution per cycle \$69.12

SUBTOTAL of Receipts This Page (optional).....	280.54
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: (check only one)	PAGE 65 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Speziale, Donald, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx3696
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18960
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll contribution per cycle \$10.00

B. Spicer, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx1303
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18961
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll contribution per cycle \$15.00

C. Stuart, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx2061
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18962
 Amount of Each Receipt this Period 90.00
 Memo Item
 Payroll contribution per cycle \$45.00

SUBTOTAL of Receipts This Page (optional).....▶ 140.00
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 66 OF 78
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Sui, Wendy, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016
Mailing Address Employee # xx7957 50 Beale Street		Transaction ID : SA11AI.18965
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Manager	<input type="checkbox"/> Memo Item Payroll contribution per cycle \$15.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Summer, Sarah, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016
Mailing Address emp xx1535 50 Beale street		Transaction ID : SA11AI.18966
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.00
Name of Employer (for Individual) Blue Shield of California	Occupation (for Individual) Sr. Counsel	<input type="checkbox"/> Memo Item Payroll contribution per cycle \$38.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 748.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Sun, Cecilia, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2016
Mailing Address Employee # xx3131 50 Beale Street		Transaction ID : SA11AI.18967
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 90.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) VP	<input type="checkbox"/> Memo Item Payroll contribution per cycle \$45.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1170.00	

SUBTOTAL of Receipts This Page (optional).....▶	196.00
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 67 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Tate, Eric, , ,

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

Mailing Address Employee # xx5215
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.18968

Amount of Each Receipt this Period
20.00

Memo Item
Payroll contribution per cycle \$10.00

B. Taylor, Jayne W, , ,

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

Mailing Address Emp# xx5713
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.18969

Amount of Each Receipt this Period
50.00

Memo Item
Payroll contribution per cycle \$25.00

C. Teismann, Lynne, , ,

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

Mailing Address Employee# xx2926
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
468.00

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.18970

Amount of Each Receipt this Period
36.00

Memo Item
Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....▶ 106.00

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 68 OF 78
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Terrana, Antoinette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee# xx1496
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 12 / 31 / 2016
Transaction ID : SA11AI.18971

Amount of Each Receipt this Period
 50.00

Memo Item
 Payroll contribution per cycle \$25.00

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

Mailing Address Employee# xx8616
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1430.00

Date of Receipt
 12 / 31 / 2016
Transaction ID : SA11AI.18972

Amount of Each Receipt this Period
 110.00

Memo Item
 Payroll contribution per cycle \$55.00

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

Mailing Address Employee# xx4413
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 342.00

Date of Receipt
 12 / 31 / 2016
Transaction ID : SA11AI.18973

Amount of Each Receipt this Period
 36.00

Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 196.00

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 69 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Trauth, James, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee# xx2147
50 Beale Street

City San Francisco	State CA	Zip Code 94105
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) 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
12		31		2016

Transaction ID : SA11AI.18974

Amount of Each Receipt this Period
20.00

Memo Item
Payroll contribution per cycle \$10.00

B. Trenam, Joanne, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address emp xx0511, 50 Beale Street

City San Francisco	State CA	Zip Code 94105
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Shield	Occupation (for Individual) Manager
--	--

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
12		31		2016

Transaction ID : SA11AI.18975

Amount of Each Receipt this Period
20.00

Memo Item
Payroll contribution per cycle \$10.00

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

Mailing Address Emp# xx5624
50 Beale Street

City San Francisco	State CA	Zip Code 94105
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Manager
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
468.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2016

Transaction ID : SA11AI.18976

Amount of Each Receipt this Period
36.00

Memo Item
Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	76.00
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 70 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Ulrich, Loni, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Emp# xx8333
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 390.00

Date of Receipt
 12 / 31 / 2016
Transaction ID : SA11AI.18977

Amount of Each Receipt this Period
 30.00

Memo Item
 Payroll contribution per cycle \$15.00

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

Mailing Address Emp# xx2459
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1170.00

Date of Receipt
 12 / 31 / 2016
Transaction ID : SA11AI.18978

Amount of Each Receipt this Period
 90.00

Memo Item
 Payroll contribution per cycle \$45.00

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

Mailing Address Emp# xx6393
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 468.00

Date of Receipt
 12 / 31 / 2016
Transaction ID : SA11AI.18979

Amount of Each Receipt this Period
 36.00

Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....▶ 156.00

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 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Van Goor, Anthony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3046
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18980
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Virgil, Millie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8446
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Head of Shared Services
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18981
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll contribution per cycle \$10.00

C. Wagner, Jason, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx7917
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18983
 Amount of Each Receipt this Period 24.00
 Memo Item
 Payroll contribution per cycle \$12.00

SUBTOTAL of Receipts This Page (optional).....	94.00
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 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Walthall, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx2537
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1820.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18984
 Amount of Each Receipt this Period
 140.00
 Memo Item
 Payroll contribution per cycle \$70.00

B. Weedn, Molly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx3790
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18986
 Amount of Each Receipt this Period
 40.00
 Memo Item
 Payroll contribution per cycle \$20.00

C. Welch Barker, Melissa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1512
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18987
 Amount of Each Receipt this Period
 90.00
 Memo Item
 Payroll contribution per cycle \$45.00

SUBTOTAL of Receipts This Page (optional).....	270.00
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 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Wells, Darrin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8661
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18988
 Amount of Each Receipt this Period
 90.00
 Memo Item
 Payroll contribution per cycle \$45.00

B. Whitelaw, Jayne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx5978
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18989
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Wilkins, Kimball, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx3150
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 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
 12 / 31 / 2016
Transaction ID : SA11AI.18990
 Amount of Each Receipt this Period
 30.00
 Memo Item
 Payroll contribution per cycle \$15.00

SUBTOTAL of Receipts This Page (optional).....	170.00
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 78
	<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"/>	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Williams, Bryce, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8031
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18991
 Amount of Each Receipt this Period
 90.00
 Memo Item
 Payroll contribution per cycle \$45.00

B. Winter, Wendy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx2464
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18992
 Amount of Each Receipt this Period
 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Wong, Salina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx3056
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18995
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	176.00
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 75 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Woodside, Christine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx5513
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18996
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Worbets, Jason, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx1921
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18997
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Yang, Winnie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx7578
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2016
Transaction ID : SA11AI.18999
 Amount of Each Receipt this Period
 36.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	136.00
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 76 OF 78
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Yao, Amy, , ,

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

Mailing Address 50 Beale Street
employee# xx5363

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
910.00

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.19000

Amount of Each Receipt this Period
70.00

Memo Item
Payroll contribution per cycle \$35.00

B. Yi, Matthew, , ,

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

Mailing Address Employee # xx2915
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.19001

Amount of Each Receipt this Period
50.00

Memo Item
Payroll contribution per cycle \$25.00

C. Yokoyama, Krista, , ,

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

Mailing Address Employee# xx8246
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Sr. Manager

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
468.00

Date of Receipt
12 / 31 / 2016
Transaction ID : SA11AI.19002

Amount of Each Receipt this Period
36.00

Memo Item
Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....▶ 156.00

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 77 OF 78
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Zimmerling, Marcus, , ,

Mailing Address Employee# xx5374
50 Beale Street

City San Francisco	State CA	Zip Code 94105
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Director
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2016

Transaction ID : SA11AI.19004

Amount of Each Receipt this Period
36.00

Memo Item
Payroll contribution per cycle \$18.00

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	11240.52

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"/> 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

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

NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Jimmy Gomez for Congress

Full Name (Last, First, Middle Initial)

Mailing Address 3756 W. Ave 40
Suite K #117

City Los Angeles State CA Zip Code 90065

Purpose of Disbursement 2016 General Contribution

Candidate Name Jimmy Gomez for Congress

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: CA District:

Date of Disbursement 12 / 28 / 2016

FEC Identification Number C00629659
Transaction ID : SB23.18744

Amount of Each Disbursement this Period 5000.00

Memo Item

B. MCCARTHY VICTORY FUND

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 30844

City BETHESDA State MD Zip Code 20824

Purpose of Disbursement 2016 Contribution

Candidate Name MCCARTHY VICTORY FUND

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement 12 / 28 / 2016

FEC Identification Number C00541011
Transaction ID : SB23.18715

Amount of Each Disbursement this Period 5000.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	10000.00