

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL OPERATIONS CENTER 2004 OCT 15 A 11:05 Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over five lines BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 60 BEALE STREET 18-109 SAN FRANCISCO CA 94105 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CC9340664 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) [] July 15 Quarterly Report (Q2) [] October 15 Quarterly Report (Q3) [X] January 31 Quarterly Report (YE) [] July 31 Mid-Year Report (Non-election Year Only) (MY) [] Termination Report (TER) [] (b) Monthly Report Due On: Feb 20 (M2) [] Mar 20 (M3) [] Apr 20 (M4) [] May 20 (M5) [] Jun 20 (M6) [] Jul 20 (M7) [] Aug 20 (M8) [] Sep 20 (M9) [] Oct 20 (M10) [] Nov 20 (M11) (Non-Election Year Only) [] Dec 20 (M12) (Non-Election Year Only) [] Jan 31 (YE) [] (c) 12-Day PRE-Election Report for the: Primary (12P) [] General (12G) [] Special (12S) [] Convention (12C) [] 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 07 01 2004 through 09 30 2004

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 30X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Report Covering the Period:

From:

07 01 2004

To:

09 30 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2004	2004	2041992
(b) Cash on Hand at Beginning of Reporting Period	3624425	
(c) Total Receipts (from Line 18)	1791848	4936391
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(b) and 6(c) for Column B)	5416273	6978343
7. Total Disbursements (from Line 31)	2205342	3667412
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3210931	3210931
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	0	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2008)

Page 3

Write or Type Committee Name

Report Covering the Period: From: **07 01 2004** To: **09 30 2004**

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	893781	2562348
(i) Itemized (see Schedule A)	798067	2274042
(e) Unitemized	95714	288306
(ii) TOTAL (add Lines 11(a)(i) and (ii))	1791848	4836391
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contributions (add Lines 11(a)(i), (b), and (c)) (Copy Totals to Line 33, page 5)	1791848	4836391
12. Transfers From Affiliated/Other Party Committees	0	0
13. All Loans Received	0	0
14. Loan Repayments Received	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0
17. Other Federal Receipts (Dividends, interest, etc.)	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0	0
(b) Levin Funds (from Schedule H5)	0	0
(c) Total Transfers (add 18(a) and 18(b))	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1791848	4836391
20. Total Federal Receipts (subtract Line 14(c) from Line 19)	1791848	4836391

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 12/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees	550000	1100000
23. Contributions to Federal Candidates/Committees and Other Political Committees	1650000	2550000
24. Independent Expenditures (see Schedule E)	5342	19266
25. Coordinated Party Expenditures (2 U.S.C. §4410(d)) (see Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(2D))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 24, 25, 26, 27, 28(d), 29 and 30(c))	2205342	3669266
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	2205342	3669266

DETAILED SUMMARY PAGE
of Disbursements

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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(c), page 3)	179,848	483,391
34. Total Contribution Refunds (from Line 25(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	179,848	483,391
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 2)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)		

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

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

FOR LINE NUMBER: PAGE: 6 / 15
(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. Full Name (Last, First, Middle Initial)
Bruce Soderen

Mailing Address **50 Beale Street
23rd Floor**

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

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

Name of Employer: **Blue Shield of California** Occupation: **Chief Executive Officer**

Receipt For: Primary General Other (specify) **Aggregate Year-to-Date: 315.00**

Date of Receipt
09 30 2004

Transaction ID: SA11A1.4217

Amount of Each Receipt this Period
315.00

Bi/Weekly Payroll Deduction
\$45.00

B. Full Name (Last, First, Middle Initial)
Eric Knox

Mailing Address **50 Beale Street**

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

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

Name of Employer: **Blue Shield of California** Occupation: **Chief Medical Officer**

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

Date of Receipt
09 30 2004

Transaction ID: SA11A1.4219

Amount of Each Receipt this Period
280.00

Bi/Weekly Payroll Deduction
\$40

C. Full Name (Last, First, Middle Initial)
David Swann

Mailing Address **50 Beale Street**

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

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

Name of Employer: **Blue Shield of California** Occupation: **Chief Information Officer**

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

Date of Receipt
09 30 2004

Transaction ID: SA11A1.4220

Amount of Each Receipt this Period
280.00

Bi/Weekly Payroll Deduction
\$40

SUBTOTAL of Receipts This Page (optional) **875.00**

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 7 / 18
(check only one)
 1a 1b 1c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Christopher Pagan
Mailing Address 6701 Center Drive West
City Los Angeles State CA Zip Code 90045
FEC ID number of contributing federal political committee: C
Name of Employer Blue Shield of California
Occupation Employee
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 350.00

Date of Receipt 09 30 2004
Transaction ID: SA11A1.4235
Amount of Each Receipt this Period 350.00
Bi-Weekly Payroll Deduction \$50

B. Full Name (Last, First, Middle Initial)
Elián Canch
Mailing Address 4207 Town Center Blvd
City El Dorado Hills State CA Zip Code 95702
FEC ID number of contributing federal political committee: C
Name of Employer Blue Shield of California
Occupation Vice President, Sales
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 246.47

Date of Receipt 09 30 2004
Transaction ID: SA11A1.4224
Amount of Each Receipt this Period 246.47
Bi-Weekly Payroll Deduction \$35.21

C. Full Name (Last, First, Middle Initial)
Thomas Epstein
Mailing Address 50 Beale Street
City San Francisco State CA Zip Code 94105
FEC ID number of contributing federal political committee: C
Name of Employer Blue Shield of California
Occupation Vice President, Public Affairs
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 289.50

Date of Receipt 09 30 2004
Transaction ID: SA11A1.4222
Amount of Each Receipt this Period 289.50
Bi-Weekly Payroll Deduction \$38.50

SUBTOTAL of Receipts This Page (optional) **965.97**
TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 3 / 18

(check only one)

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

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

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

Mailing Address: **50 Beale Street**

City: **San Francisco** State: **CA** Zip Code: **94106**

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

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

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: **700.00**

Date of Receipt: **09 30 2004**

Transaction ID: **SA11A14230**

Amount of Each Receipt this Period: **700.00**

Bi-Weekly Payroll Deduction: **\$100**

B. Keon Gima
Full Name (Last, First, Middle Initial)

Mailing Address: **50 Beale Street**

City: **San Francisco** State: **CA** Zip Code: **94106**

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

Name of Employer: **Blue Shield of California** Occupation: **Manager**

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: **350.00**

Date of Receipt: **09 30 2004**

Transaction ID: **SA11A14236**

Amount of Each Receipt this Period: **350.00**

Bi-Weekly Payroll Deduction: **\$50**

C. Marlene Jackson
Full Name (Last, First, Middle Initial)

Mailing Address: **50 Beale Street**

City: **San Francisco** State: **CA** Zip Code: **94106**

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

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

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: **349.72**

Date of Receipt: **09 30 2004**

Transaction ID: **SA11A14240**

Amount of Each Receipt this Period: **349.72**

Bi-Weekly Payroll Deduction: **\$49.96**

SUBTOTAL of Receipts This Page (optional) **1399.72**

TOTAL This Period (last page this line number only) **1399.72**

**SCHEDULE A (FEC Form SX)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 9/18
(check only one)
 1a 1b 1c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Herb Kluz
 Mailing Address 50 Beale Street
 City State Zip Code
 San Francisco CA 94105
 FEC ID number of contributing federal political committee: C
 Name of Employer: Blue Shield of California
 Occupation: Chief Financial Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 672.49

Date of Receipt
09 30 2004
 Transaction ID: SA11A14232
 Amount of Each Receipt this Period: 672.49
 Bi-Weekly Payroll Deduction: \$96.07

B. Full Name (Last, First, Middle Initial)
Dornd Lange
 Mailing Address 50 Beale Street
 City State Zip Code
 San Francisco CA 94105
 FEC ID number of contributing federal political committee: C
 Name of Employer: Blue Shield of California
 Occupation: Chief Analytics Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 485.73

Date of Receipt
09 30 2004
 Transaction ID: SA11A14232
 Amount of Each Receipt this Period: 485.73
 Bi-Weekly Payroll Deduction: \$85.99

C. Full Name (Last, First, Middle Initial)
Gerald Lhina
 Mailing Address 4207 Town Center Blvd
 City State Zip Code
 El Dorado Hills CA 95762
 FEC ID number of contributing federal political committee: C
 Name of Employer: Blue Shield of California
 Occupation: Employee
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 350.00

Date of Receipt
09 30 2004
 Transaction ID: SA11A14237
 Amount of Each Receipt this Period: 350.00
 Bi-Weekly Payroll Deduction: \$50

SUBTOTAL of Receipts This Page (optional) **1508.22**
 TOTAL This Period (last page has line number only)

1508.22

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

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

FOR LINE NUMBER		PAGE 10 / 16	
(check only one)			
<input checked="" type="checkbox"/> 1a	<input type="checkbox"/> 1b	<input type="checkbox"/> 1c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) Kathleen Lynaugh		Date of Receipt MM/DD/YYYY 09/30/2004	
Mailing Address 50 Beale Street		Transaction ID: SA11A1.4226	
City San Francisco	State CA	Zip Code 94105	Amount of Each Receipt This Period 210.00
FEC ID number of contributing federal political committee C		Bi-Weekly Payroll Deduction \$30	
Name of Employer Blue Shield of California	Occupation Employee	Aggregate Year-to-Date 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) Paul Markovich		Date of Receipt MM/DD/YYYY 09/30/2004	
Mailing Address 50 Beale Street		Transaction ID: SA11A1.4226	
City San Francisco	State CA	Zip Code 94105	Amount of Each Receipt This Period 269.22
FEC ID number of contributing federal political committee C		Bi-Weekly Payroll Deduction \$38.48	
Name of Employer Blue Shield of California	Occupation Employee	Aggregate Year-to-Date 269.22	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) Robert Mores		Date of Receipt MM/DD/YYYY 09/30/2004	
Mailing Address 4207 Town Center Blvd		Transaction ID: SA11A1.4234	
City El Dorado Hills	State CA	Zip Code 95762	Amount of Each Receipt This Period 363.79
FEC ID number of contributing federal political committee C		Bi-Weekly Payroll Deduction \$51.97	
Name of Employer Blue Shield of California	Occupation Senior Vice President	Aggregate Year-to-Date 363.79	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	843.01
TOTAL This Period (last page, this line number only)	

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

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

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

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

A. Full Name (Last, First, Middle Initial)
Kathy Roberts

Mailing Address **50 Beavo Street**

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

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

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

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date **350.00**

Date of Receipt
09 30 2004

Transaction ID: **SA11A1.4238**

Amount of Each Receipt this Period
350.00

Bi-Weekly Payroll Deduction
\$30

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

Mailing Address **6300 Canoga Avenue**

City **Woodland Hills** State **CA** Zip Code **91367**

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

Name of Employer: **Blue Shield of California** Occupation: **Sensor Vice President**

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date **210.00**

Date of Receipt
09 30 2004

Transaction ID: **SA11A1.4227**

Amount of Each Receipt this Period
210.00

Bi-Weekly Payroll Deduction
\$30

C. Full Name (Last, First, Middle Initial)
Gilbert Solomon

Mailing Address **6300 Canoga Avenue**

City **Woodland Hills** State **CA** Zip Code **91367**

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

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

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date **245.28**

Date of Receipt
09 30 2004

Transaction ID: **SA11A1.4225**

Amount of Each Receipt this Period
245.28

Bi-Weekly Payroll Deduction
\$35.04

SUBTOTAL of Receipts This Page (optional) **805.28**

TOTAL This Period (last page this line number only)

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

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

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

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

A. Nancy Slater
Full Name (Last, First, Middle Initial)
Mailing Address 50 Beale Street
City San Francisco State CA Zip Code 94105
FEC ID number of contributing federal political committee C
Name of Employer Blue Shield of California Occupation Vice President, Pharmacy Services
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 210.00

Date of Receipt 09 30 2004
Transaction ID: SA11A1.4228
Amount of Each Receipt this Period 210.00
Bi/Weekly Payroll Deduction \$30

B. Susan Spicker
Full Name (Last, First, Middle Initial)
Mailing Address 50 Beale Street
City San Francisco State CA Zip Code 94105
FEC ID number of contributing federal political committee C
Name of Employer Blue Shield of California Occupation Marketing Manager
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 315.00

Date of Receipt 09 30 2004
Transaction ID: SA11A1.4218
Amount of Each Receipt this Period 315.00
Bi/Weekly Payroll Deduction \$45

C. Elizabeth Stone
Full Name (Last, First, Middle Initial)
Mailing Address 50 Beale Street
City San Francisco State CA Zip Code 94105
FEC ID number of contributing federal political committee C
Name of Employer Blue Shield of California Occupation Senior Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 350.00

Date of Receipt 09 30 2004
Transaction ID: SA11A1.4238
Amount of Each Receipt this Period 350.00
Bi/Weekly Payroll Deduction \$50

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

875.00

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

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

FOR LINE NUMBER: PAGE 13 / 18

(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. Lyle Swanson

Mailing Address **50 Beale Street**

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

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

Name of Employer
Blue Shield of California

Occupation
Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

MONTH / DAY / YEAR
09 / 30 / 2004

Transaction ID: **SA11A1.4221**

Amount of Each Receipt this Period

280.00

Bi-Weekly Payroll Deduction
\$40

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

Mailing Address **50 Beale Street**

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

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

Name of Employer
Blue Shield of California

Occupation
Chief Operating Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
785.61

Date of Receipt

MONTH / DAY / YEAR
09 / 30 / 2004

Transaction ID: **SA11A1.4229**

Amount of Each Receipt this Period

785.61

Bi-Weekly Payroll Deduction
\$112.23

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

Mailing Address **4207 Town Center Blvd**

City **El Dorado Hills** State **CA** Zip Code **95762**

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

Name of Employer
Blue Shield of California

Occupation
Senior Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

MONTH / DAY / YEAR
09 / 30 / 2004

Transaction ID: **SA11A1.4231**

Amount of Each Receipt this Period

700.00

Bi-Weekly Payroll Deduction
\$100

SUBTOTAL of Receipts This Page (optional)

1765.61

TOTAL This Period (last page this line number only)

8937.81

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

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

FOR LINE NUMBER:
(check only one)

PAGE 14 / 18

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

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

Full Name (Last, First, Middle Initial)

Transaction ID: SB23.4258

A. ANNA ESHOO FOR CONGRESS

Date of Disbursement

Mailing Address 555 Capitol Mall Suite 1425

09 10 2004

City Sacramento State CA Zip Code 95814

Amount of Each Disbursement this Period

Purpose of Disbursement
Reelection Support

011
Category
Type

3500.00

Candidate Name
ANNA ESHOO FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2004
Primary General
Other (specify) ▼

State: CA District: 14

Full Name (Last, First, Middle Initial)

Transaction ID: SB23.4243

B. w/o Betty Trumble BCBSA Blue PAC

Date of Disbursement

Mailing Address 1310 G Street N.W

09 30 2004

City Washington State DC Zip Code 20005

Amount of Each Disbursement this Period

Purpose of Disbursement
Membership Dues

Category
Type

5500.00

Candidate Name
BCBSA Blue PAC

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

State: District:

Full Name (Last, First, Middle Initial)

Transaction ID: SB23.4258

C. DEDICATED AMERICANS FOR THE SENATE AND HOUSE PAC

Date of Disbursement

Mailing Address 424 C St NE

07 26 2004

City Washington State DC Zip Code 20002

Amount of Each Disbursement this Period

Purpose of Disbursement
Dues Support

011
Category
Type

2000.00

Candidate Name
DEDICATED AMERICANS FOR THE SENATE AND HOUSE PAC

Office Sought: House Senate President
Disbursement For: 2004
Primary General
Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (see page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 18

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

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 (Last, First, Middle Initial)

A. Friends for Harry Reid

Mailing Address **422 C Street, NE**

City **Washington** State **DC** Zip Code **20002**

Purpose of Disbursement
Re/Election Support
Candidate Name
Friends for Harry Reid

Office Sought: House Senate President
Disbursement For: **2004**
 Primary General
Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. FRIENDS OF BYRON DORGAN

Mailing Address **PO BOX 571**

City **BISMARCK** State **ND** Zip Code **58502**

Purpose of Disbursement
Re/Election Support
Candidate Name
FRIENDS OF BYRON DORGAN

Office Sought: House Senate President
Disbursement For: **2004**
 Primary General
Other (specify) ▼

State: **ND** District: **00**

Full Name (Last, First, Middle Initial)

C. FRIENDS OF CONGRESSMAN GEORGE MILLER

Mailing Address **P.O. Box 5864**

City **Concord** State **CA** Zip Code **94524**

Purpose of Disbursement
Re/Election Support
Candidate Name
FRIENDS OF CONGRESSMAN GEORGE MILLER

Office Sought: House Senate President
Disbursement For: **2004**
 Primary General
Other (specify) ▼

State: **CA** District: **07**

Transaction ID: **SB23.4245**

Date of Disbursement

09 / **30** / **2004**

Amount of Each Disbursement this Period

1000.00

Transaction ID: **SB23.4251**

Date of Disbursement

09 / **10** / **2004**

Amount of Each Disbursement this Period

1000.00

Transaction ID: **SB23.4265**

Date of Disbursement

08 / **02** / **2004**

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 16 / 18

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

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

Full Name (Last, First, Middle Initial)
A. FRIENDS OF PATRICK J KENNEDY INC

Mailing Address P O Box 321

City Pawtucket State RI Zip Code 02862

Purpose of Disbursement
ReElection Support
Candidate Name
FRIENDS OF PATRICK J KENNEDY INC

Office Sought: House Senate President
Disbursement For: 2004
 Primary General
Other (specify) ▼
State: RI District: 01

Transaction ID: SB23.4254

Date of Disbursement
08 / 24 / 2004

Amount of Each Disbursement this Period
1000.00

011
Category/
Type

Full Name (Last, First, Middle Initial)
B. GLACIER PAC

Mailing Address 818 Connecticut Ave. NW
Suite 1100

City Washington State DC Zip Code 20008

Purpose of Disbursement
Misc Baucus ReElection Support
Candidate Name
GLACIER PAC

Office Sought: House Senate President
Disbursement For: 2004
 Primary General
Other (specify) ▼
State: District:

Transaction ID: SB23.4256

Date of Disbursement
09 / 15 / 2004

Amount of Each Disbursement this Period
2000.00

011
Category/
Type

Full Name (Last, First, Middle Initial)
C. HawkEye PAC

Mailing Address 5327 Holmes Run Parkway

City Alexandria State VA Zip Code 22304

Purpose of Disbursement
ReElection Support
Candidate Name
HawkEye PAC

Office Sought: House Senate President
Disbursement For: 2004
 Primary General
Other (specify) ▼
State: IA District:

Transaction ID: SB23.4249

Date of Disbursement
09 / 15 / 2004

Amount of Each Disbursement this Period
1000.00

011
Category/
Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

4000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 / 18

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

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

Full Name (Last, First, Middle Initial)

A. JIM COSTA FOR CONGRESS

Mailing Address 2037 WEST BULLARD PMB #509

City FREGNO State CA Zip Code 93711

Purpose of Disbursement
Reelection Support

Candidate Name
JIM COSTA FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2004
Primary General
Other (specify) ▼

State: CA District: 20

Full Name (Last, First, Middle Initial)

B. PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN

Mailing Address PO BOX 3682

City SEATTLE State WA Zip Code 98124

Purpose of Disbursement
Reelection Support

Candidate Name
PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN

Office Sought: House Senate President
Disbursement For: 2004
Primary General
Other (specify) ▼

State: WA District: 00

Full Name (Last, First, Middle Initial)

C. WYDEN FOR SENATE

Mailing Address 123 NE 3RD SUITE 321

City PORTLAND State OR Zip Code 97232

Purpose of Disbursement
Reelection Support

Candidate Name
WYDEN FOR SENATE

Office Sought: House Senate President
Disbursement For: 2004
Primary General
Other (specify) ▼

State: OR District: 00

Transaction ID: SB23.4260

Date of Disbursement

08 30 2004

Amount of Each Disbursement this Period

1500.00

011
Category
Type

Transaction ID: SB23.4264

Date of Disbursement

08 24 2004

Amount of Each Disbursement this Period

1000.00

011
Category
Type

Transaction ID: SB23.4262

Date of Disbursement

08 24 2004

Amount of Each Disbursement this Period

1000.00

011
Category
Type

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

22000.00

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 18 / 18
FOR LINE 24 OF FORM 3X

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

FEC IDENTIFICATION NUMBER
C

Check if 24-hour notice 48-hour notice
Full Name (Last, First, Middle, Initial) of Payee

Date
MM / DD / YYYY

UNITEMIZED Independent Expenditures

Amount
00

Mailing Address

Transaction ID:

City State Zip Code

Office Sought: House State
 Senate District
 Presidential

Purpose of Expenditure
Bank Fees Category/Type

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:

Disbursement For: Primary General

Other (specify):

Calendar Year-To-Date Per Election for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	53.42
(c) TOTAL Independent Expenditures	53.42

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Date MM / DD / YYYY

Signature

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

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

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