

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER  
2016 OCT 11 AM 11:54

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)

ADDRESS (number and street)

PO BOX 3248



Check if different  
than previously  
reported. (ACC)

OMAHA

NE

68124

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00276311

3. IS THIS  
REPORT

N

NEW  
(N)

OR

A

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

MM / DD / YYYY

in the  
State of

(d) 30-Day  
POST-Election  
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

MM / DD / YYYY

in the  
State of

5. Covering Period

MM / DD / YYYY  
01 / 01 / 2016

MM / DD / YYYY  
01 / 01 / 2016

MM / DD / YYYY  
20 / 16 / 2016

through

MM / DD / YYYY  
09 / 30 / 2016

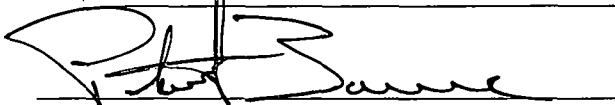
MM / DD / YYYY  
09 / 30 / 2016

MM / DD / YYYY  
20 / 16 / 2016

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 PATRICK J. BOURNE

Signature of Treasurer



Date

MM / DD / YYYY  
10 / 10 / 2016

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

Office  
Use  
Only

FEC FORM 3X  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)**

Report Covering the Period:

From:

MM / DD / YYYY  
07 / 01 / 2016

To:

MM / DD / YYYY  
09 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span>YYYYYY 2016</span>		<span>XXXXXXXXXX 35,412.95</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span>XXXXXXXXXX 35,629.71</span>	
(c) Total Receipts (from Line 19) .....	<span>XXXXXXXXXX 7,379.36</span>	<span>XXXXXXXXXX 22,712.48</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span>XXXXXXXXXX 43,009.07</span>	<span>XXXXXXXXXX 58,125.43</span>
7. Total Disbursements (from Line 31) .....	<span>XXXXXXXXXX 57.38</span>	<span>XXXXXXXXXX 15,173.74</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span>XXXXXXXXXX 42,951.69</span>	<span>XXXXXXXXXX 42,951.69</span>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span>XXXXXXXXXX</span>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span>XXXXXXXXXX</span>	



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

2016-10-11 09:00:10Z

# DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Report Covering the Period:

From:

MM / DD / YYYY  
07 / 01 / 2016

To:

MM / DD / YYYY  
09 / 30 / 2016

## 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).....

7,685.70

16,335.66

(ii) Unitemized.....

-306.34

6,376.82

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

7,379.36

22,712.48

(b) Political Party Committees.....

(c) Other Political Committees

(such as PACs).....

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

7,379.36

22,712.48

12. Transfers From Affiliated/Other

Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

17. Other Federal Receipts

(Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)).....▶

7,379.36

22,712.48

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

7,379.36

22,712.48

2016-10-11 09:00:00

## 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 .....	57.38	173.74	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	57.38	173.74	
22. Transfers to Affiliated/Other Party Committees.....		8,500.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		6,500.00	
24. Independent Expenditures (use Schedule E) .....			
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....			
26. Loan Repayments Made.....			
27. Loans Made.....			
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....			
(b) Political Party Committees .....			
(c) Other Political Committees (such as PACs).....			
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....			
29. Other Disbursements .....			
30. Federal Election Activity (52 U.S.C. § 30101(20))			
(a) Allocated Federal Election Activity (from Schedule H6)			
(i) Federal Share .....			
(ii) "Levin" Share.....			
(b) Federal Election Activity Paid Entirely With Federal Funds .....			
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).....			
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	57.38	15,173.74	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	57.38	15,173.74	

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7,379.36	22,712.48
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7,379.36	22,712.48
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	57.38	173.74
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	57.38	173.74

2016-10-11 00:00:00

**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 1 OF 12

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

NAME OF COMMITTEE (In Full)

**BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)**

Full Name (Last, First, Middle Initial)

**A. Martin, Steven, S**

Mailing Address

**9605 Oak Circle**

City

**Omaha**

State

**NE**

Zip Code

**68124-2767**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Blue Cross Blue Shield of NE**

Occupation

**CEO**

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**3,659.76**

Date of Receipt

**09**

**30**

**2016**

Amount of Each Receipt this Period

**1,219.92**

Full Name (Last, First, Middle Initial)

**B. Trowbridge, Lewis**

Mailing Address

**220 South 31st Avenue**

City

**Omaha**

State

**NE**

Zip Code

**68131**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Blue Cross Blue Shield of NE**

Occupation

**President**

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1271.55**

Date of Receipt

**09**

**30**

**2016**

Amount of Each Receipt this Period

**280.20**

Full Name (Last, First, Middle Initial)

**C. Grandfield, Steven**

Mailing Address

**23307 Sunshine Lane**

City

**Council Bluffs**

State

**IA**

Zip Code

**51503-7830**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Blue Cross Blue Shield of NE**

Occupation

**EVP Strategy Innovation**

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1,186.81**

Date of Receipt

**09**

**30**

**2016**

Amount of Each Receipt this Period

**261.53**

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

**1,761.65**

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 2 OF 12

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)**

Full Name (Last, First, Middle Initial)

**A. Kolli, Rama**

Mailing Address

**2723 N 191st Street**

City

**Elkhorn**

State

**NE**

Zip Code

**68022**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Blue Cross Blue Shield of NE**

Occupation

**VP Information Services**

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**918.63**

Date of Receipt

**09 / 30 / 2016**

Amount of Each Receipt this Period

**305.75**

Full Name (Last, First, Middle Initial)

**B. Arnold, John**

Mailing Address

**10482 S 179th Street**

City

**Omaha**

State

**NE**

Zip Code

**68136**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Blue Cross Blue Shield of NE**

Occupation

**Sr Sales Executive Large Group**

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**774.55**

Date of Receipt

**09 / 30 / 2016**

Amount of Each Receipt this Period

**234.60**

Full Name (Last, First, Middle Initial)

**C. Twohig, Gretchen**

Mailing Address

**18676 Oregon Cir.**

City

**Elkhorn**

State

**NE**

Zip Code

**68022**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Blue Cross Blue Shield of NE**

Occupation

**Associate General Counsel**

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**701.78**

Date of Receipt

**09 / 30 / 2016**

Amount of Each Receipt this Period

**206.98**

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

**747.33**

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 3 OF 12

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<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)**

Full Name (Last, First, Middle Initial)

**A. Courtney, Susan**

Mailing Address

1711 N. 171 St.

City

Omaha

State

NE

Zip Code

68118

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Blue Cross Blue Shield of NE

Occupation

SVP & CEO of CoreLink

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.31

Date of Receipt

09 / 30 / 2016

Amount of Each Receipt this Period

215.64

Full Name (Last, First, Middle Initial)

**B. Waldman, Sarah**

Mailing Address

12317 Slayton Street

City

Papillion

State

NE

Zip Code

68046

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Blue Cross Blue Shield of NE

Occupation

SVP Administration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.03

Date of Receipt

09 / 30 / 2016

Amount of Each Receipt this Period

172.69

Full Name (Last, First, Middle Initial)

**C. Byers, Gerald**

Mailing Address

128 Allison Ave.

City

Papillion

State

NE

Zip Code

68133

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Blue Cross Blue Shield of NE

Occupation

SVP and CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

705.54

Date of Receipt

09 / 30 / 2016

Amount of Each Receipt this Period

234.93

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

623.26

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 4 OF 12

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NAME OF COMMITTEE (In Full)

**BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)**

Full Name (Last, First, Middle Initial)

**A. Richardson, Jennifer**

Mailing Address

**601 Skyline Drive**

City

**Elkhorn**

State

**NE**

Zip Code

**68022**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Blue Cross Blue Shield of NE**

Occupation

**SVP Operations**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**613.49**

Date of Receipt

**09 / 30 / 2016**

Amount of Each Receipt this Period

**244.18**

Full Name (Last, First, Middle Initial)

**B. Alm, Dan**

Mailing Address

**5071 S 175 St.**

City

**Omaha**

State

**NE**

Zip Code

**68135**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Blue Cross Blue Shield of NE**

Occupation

**VP Actuarial Underwriting**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**383.95**

Date of Receipt

**09 / 30 / 2016**

Amount of Each Receipt this Period

**101.38**

Full Name (Last, First, Middle Initial)

**C. Schaefer, Joann**

Mailing Address

**106 Abbey Landing**

City

**Valley**

State

**NE**

Zip Code

**68064-9332**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Blue Cross Blue Shield of NE**

Occupation

**SVP and CMO**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**417.51**

Date of Receipt

**09 / 30 / 2016**

Amount of Each Receipt this Period

**144.02**

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

**489.58**

**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 5 OF 12

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NAME OF COMMITTEE (In Full)

**BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)**

Full Name (Last, First, Middle Initial)

**A. Bourne, Pat**

Mailing Address

13020 Binney St

City

Omaha

State

NE

Zip Code

68164

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of NE

Occupation

SVP Sales & Account Services

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

387.31

Date of Receipt

09 / 30 / 2016

Amount of Each Receipt this Period

121.41

Full Name (Last, First, Middle Initial)

**B. Flowers, Shari**

Mailing Address

15822 Emiline St

City

Omaha

State

NE

Zip Code

68136

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of NE

Occupation

VP Compliance and Ethics CCO

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

446.55

Date of Receipt

09 / 30 / 2016

Amount of Each Receipt this Period

194.55

Full Name (Last, First, Middle Initial)

**C. Beerman, Jane**

Mailing Address

19509 Frances Circle

City

Omaha

State

NE

Zip Code

68130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of NE

Occupation

Dir Corporate Communication

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

296.58

Date of Receipt

09 / 30 / 2016

Amount of Each Receipt this Period

82.28

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

398.24

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 6 OF 12

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)**

Full Name (Last, First, Middle Initial)

**A. Anderson, Dave**

Mailing Address  
15406 Lakeside Plaza

City State Zip Code  
Omaha NE 68137

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of NE

Occupation  
VP Finance Treasurer CAO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.81

Date of Receipt

09 / 30 / 2016

Amount of Each Receipt this Period

106.49

Full Name (Last, First, Middle Initial)

**B. Dunning, Eric**

Mailing Address  
1625 N 53rd St

City State Zip Code  
Omaha NE 68104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of NE

Occupation  
Dir Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.68

Date of Receipt

09 / 30 / 2016

Amount of Each Receipt this Period

83.89

Full Name (Last, First, Middle Initial)

**C. Williams, Clint**

Mailing Address  
19522 Pearl Cir

City State Zip Code  
Elkhorn NE 68022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of NE

Occupation  
VP Risk Adjustment and Pharmacy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.33

Date of Receipt

09 / 30 / 2016

Amount of Each Receipt this Period

79.40

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

269.78

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 7 OF 12

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CROSS BLUE SHIELD OF NE (BLUEPAC)**

Full Name (Last, First, Middle Initial)

**A. Strawn, John**

Mailing Address

**908 Joseph Drive**

City

**Papillion**

State

**NE**

Zip Code

**68046**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Blue Cross Blue Shield of NE**

Occupation

**Sup Life Safety**

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**302.43**

Date of Receipt

**09**

**30**

**2016**

Amount of Each Receipt this Period

**302.43**

Full Name (Last, First, Middle Initial)

**B. Collins, Russell**

Mailing Address

**3303 S 116 Ave**

City

**Omaha**

State

**NE**

Zip Code

**68144**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Blue Cross Blue Shield of NE**

Occupation

**VP Legal and General Counsel**

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**286.34**

Date of Receipt

**09**

**30**

**2016**

Amount of Each Receipt this Period

**286.34**

Full Name (Last, First, Middle Initial)

**C. Johnson, Leah**

Mailing Address

**10631 S 190th St**

City

**Omaha**

State

**NE**

Zip Code

**68136**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Blue Cross Blue Shield of NE**

Occupation

**Dir Enrollment Services**

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**271.62**

Date of Receipt

**09**

**30**

**2016**

Amount of Each Receipt this Period

**271.62**

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

**860.39**

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

2016-10-11 00:00:00

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

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NAME OF COMMITTEE (In Full)

**BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)**

Full Name (Last, First, Middle Initial)

**A. Alm, Jeni**

Mailing Address

11339 Northridge Dr.

City

Gretna

State

NE

Zip Code

68028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of NE

Occupation

VP Health Network Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.13

Date of Receipt

09 / 30 / 2016

Amount of Each Receipt this Period

264.13

Full Name (Last, First, Middle Initial)

**B. Kiefer, Timothy**

Mailing Address

5118 California Street

City

Omaha

State

NE

Zip Code

68132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of NE

Occupation

Enterprise Consultant Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.62

Date of Receipt

09 / 30 / 2016

Amount of Each Receipt this Period

259.62

Full Name (Last, First, Middle Initial)

**C. Archuleta, Dan**

Mailing Address

6745 Shadow Ridge Rd

City

Lincoln

State

NE

Zip Code

68512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of NE

Occupation

VP of Innovation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.18

Date of Receipt

09 / 30 / 2016

Amount of Each Receipt this Period

259.18

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

782.93

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

2016-10-11 00:00:00

**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 9 OF 12

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)**

Full Name (Last, First, Middle Initial)

**A. Pruch, Joe**

Mailing Address

1227 N 185th Street

City

Elkhorn

State

NE

Zip Code

68022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of NE

Occupation

Dir Information Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.14

Date of Receipt

MM / DD / YYYY  
09 / 30 / 2016

Amount of Each Receipt this Period

246.14

Full Name (Last, First, Middle Initial)

**B. Cameron, Ludwig**

Mailing Address

5603 N 162 St

City

Omaha

State

NE

Zip Code

68116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of NE

Occupation

VP Analytics and Data Strategy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.55

Date of Receipt

MM / DD / YYYY  
09 / 30 / 2016

Amount of Each Receipt this Period

239.55

Full Name (Last, First, Middle Initial)

**C. Ray, Cortney**

Mailing Address

2256 Vavrina Lane

City

Lincoln

State

NE

Zip Code

68512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of NE

Occupation

Mgr Government Assoc Business

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.71

Date of Receipt

MM / DD / YYYY  
09 / 30 / 2016

Amount of Each Receipt this Period

224.71

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

710.40

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

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

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

FOR LINE NUMBER:		PAGE 10 OF 12	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)

**BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)**

Full Name (Last, First, Middle Initial)

**A. Haddad, Edward**

Mailing Address

**710 Hackberry Rd**

City

**Omaha**

State

**NE**

Zip Code

**68132**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Blue Cross Blue Shield of NE**

Occupation

**Dir Corporate Compl and Privacy**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**222.02**

Date of Receipt

**09 / 30 / 2016**

Amount of Each Receipt this Period

**222.02**

Full Name (Last, First, Middle Initial)

**B. Toney, Pernell**

Mailing Address

**4601 Lake Forest Dr**

City

**Papillion**

State

**NE**

Zip Code

**68133**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Blue Cross Blue Shield of NE**

Occupation

**Dir Talent Acquisition Workforce Div**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**206.19**

Date of Receipt

**09 / 30 / 2016**

Amount of Each Receipt this Period

**206.19**

Full Name (Last, First, Middle Initial)

**C. Gilsdorf, Thomas**

Mailing Address

**5113 Bernadette Ave.**

City

**Bellevue**

State

**NE**

Zip Code

**68157**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Blue Cross Blue Shield of NE**

Occupation

**Dir Medicare Advantage Bus. Unit**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**205.23**

Date of Receipt

**09 / 30 / 2016**

Amount of Each Receipt this Period

**205.23**

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

**633.44**

**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 12

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)**

Full Name (Last, First, Middle Initial)

**A. Beaton, Susan**

Mailing Address

**4309 Amos Gates Dr**

City

**Bellevue**

State

**NE**

Zip Code

**68123**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Blue Cross Blue Shield of NE**

Occupation

**Sr Dir Nurse Care Mgmt & Clinical**

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**204.74**

Date of Receipt

**09**

**30**

**2016**

Amount of Each Receipt this Period

**204.74**

Full Name (Last, First, Middle Initial)

**B. Huether, Jeff**

Mailing Address

**17457 L St**

City

**Omaha**

State

**NE**

Zip Code

**68135**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Blue Cross Blue Shield of NE**

Occupation

**Dir of Pharmacy**

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**203.96**

Date of Receipt

**09**

**30**

**2016**

Amount of Each Receipt this Period

**203.96**

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

**09**

**30**

**2016**

Amount of Each Receipt this Period

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

**408.70**

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



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

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

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

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NAME OF COMMITTEE (In Full)

**BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)**

Full Name (Last, First, Middle Initial)

**A. BLUE CROSS BLUE SHIELD OF NE**

Mailing Address  
**PO BOX 3248**

City **OMAHA** State **NE** Zip Code **68124**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

**BLUE CROSS BLUE SHIELD OF NE** **NOT APPLICABLE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**-958.33**

Date of Receipt

**12 / 31 / 2015**

Amount of Each Receipt this Period

x Memo Item

Void 2015 year amount deposited in error. Money was deposited in bank in error and discovered in January. Employee contributions in 2016 were reduced 958.33 going into the bank to correct the 958.33 deposited in error in 2015. Deposited 31,943.77 in 2015 with receipts only being 30,985.44.

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

**0.00**

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

**7,685.70**

**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 1 OF 2

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

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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)

Full Name (Last, First, Middle Initial)

A. Fischer, Deb		Date of Disbursement							
Mailing Address PO Box 83287		<table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YYYY</td> </tr> <tr> <td>02</td> <td>24</td> <td>2016</td> </tr> </table>		MM	DD	YYYY	02	24	2016
MM	DD	YYYY							
02	24	2016							
City Lincoln	State NE	Zip Code 68501							
Purpose of Disbursement		Amount of Each Disbursement this Period							
Candidate Name Deb Fischer for U.S. Senate		<table border="1"> <tr> <td>11</td> <td>1,500.00</td> </tr> </table>		11	1,500.00				
11	1,500.00								
Office Sought:	Disbursement For:	Memo Item							
<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								
State:	District:								

B. Nebraska Sandhills PAC		Date of Disbursement							
Mailing Address 228 S. Washington Street, Suite 115		<table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YYYY</td> </tr> <tr> <td>02</td> <td>24</td> <td>2016</td> </tr> </table>		MM	DD	YYYY	02	24	2016
MM	DD	YYYY							
02	24	2016							
City Alexandria	State VA	Zip Code 22314							
Purpose of Disbursement		Amount of Each Disbursement this Period							
Candidate Name Deb Fischer Leadership PAC		<table border="1"> <tr> <td>11</td> <td>5,000.00</td> </tr> </table>		11	5,000.00				
11	5,000.00								
Office Sought:	Disbursement For:	Memo Item							
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								
State:	District:								

C.		Date of Disbursement							
Mailing Address		<table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YYYY</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>		MM	DD	YYYY			
MM	DD	YYYY							
City	State	Zip Code							
Purpose of Disbursement		Amount of Each Disbursement this Period							
Candidate Name		<table border="1"> <tr> <td></td> <td></td> </tr> </table>							
Office Sought:	Disbursement For:	Memo Item							
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								
State:	District:								

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

6,500.00

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

2016-10-11 00:00:00

**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 2 OF 2

☐ 21b ☒ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)**

Full Name (Last, First, Middle Initial)

**A.**

**BLUE PAC**

Mailing Address

1310 G Street, NW 12th Floor

City

Washington

State

DC

Zip Code

20005

Purpose of Disbursement

Candidate Name

Transfer

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2016

Amount of Each Disbursement this Period

8,500.00

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

8,500.00

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

15,000.00

2016-10-11 00:10:21

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Saver

UPS Next Day Air Saver® 1P



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Note: Express Envelopes are not for international shipments. Certain countries may require additional documentation. Visit **ups.com/importexport** to learn more.

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2016 OCT 11 AM 11:54

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Shipping Document

SHIPMENT FROM  
UPS ACCOUNT NO. 632567  
REFERENCE NUMBER

Russell & Thibodeau  
TELEPHONE 402-982-7000

BLUE CROSS BLUE SHIELD OF NE

9635 M ST

OMAHA

NE 68127

EXTREMELY URGENT DELIVERY TO

TELEPHONE

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

0201952542609 6/12 RRD

United Parcel Service, Louisville, KY

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80% Post-Consumer

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

☐ Hand Delivered Date of Receipt

☐ USPS First Class Mail Postmarked Date of Receipt

☐ USPS Registered/Certified Postmarked (R/C)

☐ USPS Priority Mail Postmarked

☐ USPS Priority Mail Express Postmarked

☐ Postmark Illegible

☐ No Postmark

☒ Overnight Delivery Service (Specify): **UPS** Shipping Date **10/10/16**  
Next Business Day Delivery ☒

☐ Received from House Records & Registration Office Date of Receipt

☐ Received from Senate Public Records Office Date of Receipt

☐ Received from Electronic Filing Office Date of Receipt

☐ Other (Specify): Date of Receipt or Postmarked

PREPARER  **10/11/16**  
DATE PREPARED

(3/2015)

2016-10-11 00:10:17