10/13/2009 17:26

Image# 29992913238

## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORIWI 3X	For C	other Than An	Authorize	d Committe	ee		Office Use Only	
NAME OF COMMITTEE (in full)		EC MAILING LA		ample:If typing or the lines	, type			
Healthy Government C	Committee-The	Political Action C	committee of Bo	CBSAZ				
	1 1 1			1 1 1 1	<u> </u>			
ADDRESS (number and stre	eet) P.C	D. Box 13466		1 1 1 1				
Check if different than previously reported. (ACC)		penix				AZ	85002	
2. FEC IDENTIFICATIO	N NUMBER	<b>~</b>	CITY 🛕		5	STATE	ZIPCC	DDE 🛕
C00215202			3. IS THIS REPORT		NEW OR		MENDED A)	
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports  April 15 Quarterly Re  July 15 Quarterly Re  X October 15 Quarterly Re  January 31 Quarterly Re  July 31 Mid- Report(Non- Year Only) (  Termination (TER)	eport(Q1) eport(Q2) eport(Q3) eport(YE) Year election MY)	(d) 30-Day Post -Elec Report for	Election on	Ä,	12C)	Se	in the	of Special (30S)
5. Covering Period	07	01 200	9	through	0 9	3 0	2009	
I certify that I have examine		and to the best of s Kathryn Baker	my knowledge	and belief it is	true, correct	and complete		
Type or Print Name of Trea	surer	o reamyn Baron						
Signature of Treasurer	Electronically F	Filed by Ms Kat	hryn Baker		D	ate 10	13	2009
NOTE : Submission of fals	e, erroneous, o	or incomplete info	rmation may su	bject the perso	on signing thi	s Report to th	e penalties of 2 U	.S.C 437g.
Office Use							FEC FOR	

FE6AN026

FEC Form 3X (Rev. 02/2003)

## SUMMARY PAGE OF RECEIPTS AND DISRUBSEMENTS

OF RECEIPTS AND DISBURSEMENTS

2 / 15

Write or Type Committee Name Healthy Government Committee-The Political Action Committee of BCBSAZ

	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand  January 1 2009		13606.95
	(b) Cash on Hand at Begining of Reporting Period	3871.95	
	(c) Total Receipts (from Line 19)	6058.00	16283.00
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	9929.95	29889.95
<b>7</b> .	Total Disbursements (from Line 31)	3700.00	23660.00
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	6229.95	6229.95
	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

X 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. 06/2004) 3 / 15

Write or Type Committee Name

Healthy Government Committee-The Political Action Committee of BCBSAZ

Report Covering the Period: From: 07 01 2009 To: 09 30 2009

	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)	2830.00	4540.00
	(ii) Unitemized	3228.00	
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	6058.00	16283.00
	(b) Political Party Committees	0.00	0.00
	<ul><li>(c) Other Political Committees</li><li>(such as PACs)</li></ul>	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	6058.00	16283.00
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
10.	to Federal candidates and Other Political Committees	0.00	0.00
17.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	6058.00	16283.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	6058.00	16283.00

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 15

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures:  (a) Shared Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(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
Transfers to Affiliated/Other Party     Committees	0.00	0.00
3. Contributions to	0.00	5.00
Federal Candidates/Committeesand Other Political Committees	3700.00	23660.00
Independent Expenditure     (use Schedule E)	0.00	0.00
5. Coordinated Expenditures Made by Party		
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
Refunds of Contributions To:  (a) Individuals/Persons Other	0.00	
Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)(d) Total Contribution Refunds	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
9. Other Disbursements	0.00	0.00
5. Other dispursements	0.00	0.00
0. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(,) : 223.2. 2	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	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))		
11. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	3700.00	23660.00
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	2722.22	20202
from Line 31)	3700.00	23660.00

### **DETAILED SUMMARY PAGE**

of Disbursements

	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)	6058.00	16283.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	6058.00	16283.00
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

FE6AN026

## SCHEDULE A (FEC Form 3X)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 15 (check only one)  X 11a 11b 11c 12  13 14 15 16 11
Ai	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Healthy Government Committee-The I	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. <u>/</u>	Full Name (Last, First, Middle Initial) Mrs. Karen Abraham	Tontioa Hote	on committee of Boboniz	Date of Receipt
۱.	Mailing Address 2444 W. Las Palmarita	as Drive		0 9 2 4 2 0 0 9
	City Phoenix	State AZ	Zip Code 85021	Transaction ID: SA11AI.9648  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	03021	90.00
	Name of Employer Blue Cross & Blue Shield of AZ	Occupation V.PCon	troller	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 270.00	
	Full Name (Last, First, Middle Initial) Mr. Tony Astorga Mailing Address P.O. Box 13466			Date of Receipt
				09 24 2009
	City Phoenix	State AZ	Zip Code 85002	Transaction ID: SA11AI.9820  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00001	150.00
	Name of Employer Blue Cross & Blue Shield of AZ	Occupation Sr. V.P.		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00	]
	Full Name (Last, First, Middle Initial) Ms Kathryn Baker	1		Date of Receipt
	Mailing Address 2444 W. Las Palmarita	as Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11AI.9657
	Phoenix	AZ	85021	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer Blue Cross & Blue Shield of Arizona	Occupation VP & Tre	easurer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00	
S	SUBTOTAL of Receipts This Page (optional)			390.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 15 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
A O	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Healthy Government Committee-The	ne name and addr	ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. ∠ <b>.</b> .	Full Name (Last, First, Middle Initial)  Mr. Richard Boals  Mailing Address 2444 W. Las Palmari	itas Drive		Date of Receipt
	City Phoenix	State AZ	Zip Code 85021	Transaction ID: SA11AI.9665  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer Blue Cross & Blue Shield of Arizona Receipt For:  Primary  General  Other (specify) ▼	Occupation President Aggregate		
	Full Name (Last, First, Middle Initial)  Ms Susan Broadman  Mailing Address 2444 W. Las Palmari	tas Drive		Date of Receipt  0 9 2 4 2 0 0 9
	City	State	Zip Code	Transaction ID: SA11AI.9667
	Phoenix	AZ	85021	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		90.00
	Name of Employer Blue Cross & Blue Shield of Arizona Receipt For:	_ , '	pecialist/EEO Coordinator	
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 270.00	]
	Full Name (Last, First, Middle Initial) Mr. James Brutlag Mailing Address 2444 W. Las Palmari	tas Drive		Date of Receipt  0 9 2 4 2 0 0 9
	City	State	Zip Code	Transaction ID: SA11AI.9668
	Phoenix FEC ID number of contributing federal political committee.	C	85021	Amount of Each Receipt this Period  240.00
	Name of Employer Blue Cross & Blue Shield of Arizona Receipt For:		erwriting & Actuarial Service	es
	Primary General Other (specify) ▼	Aggregate	600.00	
	SUBTOTAL of Receipts This Page (optional)			480.00

SCHEDULE A (F	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 15 (check only one)  X 11a 11b 11c 12  13 14 15 16 16
or for commercial purpose  NAME OF COMMITTI	s, other than using the name and a	address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Sherri Burruss  Mailing Address P. (			Date of Receipt
City	State	Zip Code	0 9 2 4 2 0 0 9  Transaction ID: SA11AI.9821
Phoenix  FEC ID number of confederal political commit		85002	Amount of Each Receipt this Period
Name of Employer BCBSAZ	Occupat Actuari	al	
Receipt For: Primary Other (specify)	General	ate Year-to-Date ▼ 450.00	
Full Name (Last, First, Mrs. Helen Chandler Mailing Address 244	Middle Initial)		Date of Receipt  0 9 2 4 2 0 0 9
City	State	Zip Code	Transaction ID: SA11Al.9672
Phoenix	AZ	85021	Amount of Each Receipt this Period
FEC ID number of con federal political commi			150.00
Name of Employer Blue Cross & Blue Shi of Arizona	OI. V.F	Claims & Federal Programs	3
Receipt For: Primary Other (specify)	General	ate Year-to-Date ▼ 450.00	
Full Name (Last, First, Kathy Clubine Mailing Address P. (	Middle Initial)  D. Box 13466		Date of Receipt
City	State	Zip Code	0 9 2 4 2 0 0 9  Transaction ID: SA11AI.9675
Phoenix  FEC ID number of confederal political commit		85002	Amount of Each Receipt this Period 90.00
Name of Employer BCBSAZ	Occupat mgr	ion	
Receipt For: Primary Other (specify)	Aggrega General	ate Year-to-Date  270.00	
SURTOTAL of Receipts	This Page (optional)		390.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 15 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and for commercial purposes, other than using the	Statements mane name and ad	ly not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Healthy Government Committee-The	Political Acti	ion Committee of BCBSAZ	
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Richard Hannon			Date of Receipt
	Mailing Address 2444 W. Las Palmari	itas Drive		09 / 24 / 2009
	City Phoenix	State AZ	Zip Code 85021	Transaction ID: SA11AI.9691
	FEC ID number of contributing federal political committee.	C	83021	Amount of Each Receipt this Period
	Name of Employer Blue Cross & Blue Shield of Arizona	Occupation Sr. V.P	en External Affairs	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 450.00	
 3.	Full Name (Last, First, Middle Initial) Bonnie Irwin			Date of Receipt
	Mailing Address 2444 W. Las Palmari	itas		09 24 2009
	City	State	Zip Code	Transaction ID: SA11AI.9696
	Phoenix  FEC ID number of contributing federal political committee.	C	85021	Amount of Each Receipt this Period  90.00
	Name of Employer BCBSAZ	Occupation vice pres		
	Receipt For:  Primary General  Other (specify) ▼	<del></del>	e Year-to-Date ▼ 270.00	
— ).	Full Name (Last, First, Middle Initial) Sheri Jackson			Date of Receipt
	Mailing Address 2444 W Las Palmarit	tas		09 24 2009
	City Phoenix	State AZ	Zip Code 85021	Transaction ID: SA11AI.9698  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	03021	90.00
	Name of Employer BCBSAZ	Occupation vice pres		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 270.00	
s	UBTOTAL of Receipts This Page (optional)			330.00
T	OTAL This Period (last page this line number	er only)		

## SCHEDULE A (FEC Form 3X)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 15 (check only one)    X   11a
A	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and addres	s of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Healthy Government Committee-The	Political Action	Committee of BCBSAZ	
	Full Name (Last, First, Middle Initial) K. A. Kelley			Date of Receipt
	Mailing Address P.O. Box 13466			0 8 1 1 2 0 0 9
	City	State	Zip Code	Transaction ID: SA11AI.9813
	Phoenix	AZ	85002	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Blue Cross Blue Shield of AZ	Occupation Director, Ph	armacy Benefits Mgmt	
	Receipt For:	Aggregate Ye	ar-to-Date ▼	
	Primary General Other (specify) ▼	0 0 0	250.00	
-	Full Name (Last, First, Middle Initial) Marty Laurel			Date of Receipt
	Mailing Address 2444 W. Las Palmari	tas Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11AI.9702
	Phoenix	AZ	85021	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		90.00
	Name of Employer BCBSAZ	Occupation vice preside	nt	
	Receipt For:	Aggregate Ye		
	Primary General Other (specify) ▼		270.00	
	Full Name (Last, First, Middle Initial) Vicky McDonald			Date of Receipt
	Mailing Address P. O. Box 13466			09 24 2009
	City	State	Zip Code	Transaction ID: SA11AI.9708
	Phoenix	AZ	85002	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		90.00
	Name of Employer BCBSAZ	Occupation vice preside	nt	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 270.00	
	SUBTOTAL of Receipts This Page (optional)	1		430.00

## SCHEDULE A (FEC Form 3X)

	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 15 (check only one)  X 11a 11b 11c 12  13 14 15 16
or for commercia	copied from such Reports and S al purposes, other than using the OMMITTEE (In Full) overnment Committee-The I	e name and add	lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
elizabeth mes Mailing Addre City Phoenix	per of contributing al committee.	State AZ C Occupation SVP Aggregate	Year-to-Date ▼	Date of Receipt    M M M
Full Name (L Mrs. Jody Mill	specify)  ast, First, Middle Initial) er ess 2444 W. Las Palmarita	as State AZ	630.00 Zip Code 85002	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Emp Blue Cross a of Arizona Receipt For:	ployer nd Blue Shield	Occupation Director  Aggregate	Year-to-Date ▼ 270.00	90.00
Mrs. Susan N	ast, First, Middle Initial) avran ess 2444 W. Las Palmarita	as State	Zip Code	Date of Receipt  0 9 2 4 2 0 0 9  Transaction ID: SA11AI.9719
Phoenix FEC ID numl federal politic	per of contributing al committee.	AZ C	85002	Amount of Each Receipt this Period 90.00
of Arizona Receipt For: Primary	oloyer nd Blue Shield  / General specify)	Occupation Vice Pres Aggregate		
SUBTOTAL of	Receipts This Page (optional)			390.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 15 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may not be sold or used by any person he name and address of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full) Healthy Government Committee-The	e Political Action Committee of BCBSAZ	
Full Name (Last, First, Middle Initial)  A. Adam Rice		Date of Receipt
Mailing Address P. O. Box 13466		09 24 2009
City <u>Phoenix</u>	State Zip Code AZ 85002	Transaction ID: SA11AI.9733  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	90.00
Name of Employer BCBSAZ	Occupation director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
Full Name (Last, First, Middle Initial) Deanna Salazar	I	Date of Receipt
Mailing Address P. O. Box 13466		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.9822
Phoenix	AZ 85002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer BCBSAZ	Occupation vice president	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) Mary Semma		Date of Receipt
Mailing Address P. O. Box 13466		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.9737
Phoenix  FEC ID number of contributing federal political committee.	AZ 85002	Amount of Each Receipt this Period  90.00
Name of Employer BCBSAZ	Occupation VP	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
SUBTOTAL of Receipts This Page (optional)		330.00
TOTAL This Period (last page this line numb	•	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 15 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Healthy Government Committee-The F	Political Action Committee of BCBSAZ	
Full Name (Last, First, Middle Initial) Su Tucker  Mailing Address P. O. Box 13466  City	State Zip Code	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
Phoenix,  FEC ID number of contributing federal political committee.  Name of Employer	AZ 85002  C Occupation	Amount of Each Receipt this Period 90.00
Receipt For: Primary General Other (specify)	Director  Aggregate Year-to-Date ▼  270.00	

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	90.00
TOTAL This Period (last page this line number only)	<b>•</b>	2830.00

A.

В.

C.

CHEDULE B (FEC Form 3X)	Use sepa	rate schedule(s)	edule(s) FOR LINE NUM (check only one)									
TEMIZED DISBURSEMENTS	for each o	category of the Summary Page		21b 27	<u> </u>	?) !2 [ !8a [	X 23 28b		24 [ 28c	25 29		26 30b
ny Information copied from such Reports and Statem for commercial purposes, other than using the name												
NAME OF COMMITTEE (In Full)		ss or arry political	COMMIN	iee io s	Olicit	JOHUH	JULIONS II	OIII St		mmuee		
Healthy Government Committee-The Politi	cal Action	Committee of	BCBS	AZ								
Full Name (Last, First, Middle Initial) BluePac							ction ID Disburs			800		
Mailing Address 1310 G Street, N.W.						0 <sup>9</sup> M	/ D	2 1	Y	žoŏ	9 <sup>Y</sup>	
	State	Zip Code			А	moun	t of Each	n Disb	ursem	nent this	Perio	od
	DC	20005			- [					2000.0	n	
Purpose of Disbursement					L					2000.0	•	
Candidate Name			Cated Typ									
Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spec	General cify) ▼										
Full Name (Last, First, Middle Initial)					Т	ransa	ction ID	· SF	 323 9	811		
Committee to Elect Chad Campbell							Disburs			011		
Mailing Address P.O. Box 25456						0 9	/ D	2 1	/ Y	ž 0 ŏ	9 <sup>Y</sup>	
	State	Zip Code			А	moun	t of Each	n Disb	ursem	nent this	Perio	od
	AZ	85002			Ī		•			250.0	0	
Purpose of Disbursement						-			-	230.0	Ų.	Ш
Candidate Name			Cate									
Senate President	ement For: Primary Other (spec	General cify) ▼										
State: AZ District: 14												
Full Name (Last, First, Middle Initial)  Montenegro for House					D	ate of	ction ID Disburs	emen				
Mailing Address 12928 W. Earll Dr.						0 9 M	/ D	1 4	' L	ž 0 ŏ	9 <sup>Y</sup>	
	State	Zip Code			А	moun	t of Each	n Disb	ursem	nent this	Perio	od
Avondale Purpose of Disbursement	AZ	85392			- [					200.0	0	$\Box$
ו מוףטפר טו בופטעופרוופוונ						_						
Candidate Name			Cate Typ									
Office Sought:  X House Senate President State: AZ District: 12	ement For: Primary Other (spec	General cify) ▼										
JBTOTAL of Disbursements This Page (optional)				<u> </u>					2	2450.0	0	
OTAL This Period (last page this line number only)				•								
SAN026					_	FEC	Schedu	ıle B (	Form	13X) (R	evise	d 02

В.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	-	PAGE 15 / 15						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 28a 28b	24 25 28c 29	26 30b					
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam										
NAME OF COMMITTEE (In Full) Healthy Government Committee-The Politi	cal Action Committee of Bo	CBSAZ								
Full Name (Last, First, Middle Initial) Republican Senate Victory Campaign			Date of Disburs		Υ					
Mailing Address P.O. Box 11494			0 8	25 7 2009						
City Tempe	State Zip Code AZ 85284		Amount of Eacl	h Disbursement this F						
Purpose of Disbursement	Г	0 0		1000.00						
Candidate Name		Category/ Type								
Office Sought:    House   Disburse   X   Senate   President     State: AZ   District:	ement For: Primary General Other (specify)									
Full Name (Last, First, Middle Initial)			Transaction ID	): SB23.9802						
Tibshraeny 2010 Exploratory Committee			Date of Disburs		V					
Mailing Address 917 W. McDowell Road			0 9 1 / 5	21						
City Phoenix	State Zip Code AZ 85007		Amount of Eacl	h Disbursement this F						
Purpose of Disbursement	Γ			250.00						
Candidate Name		Category/ Type								
Office Sought:    House   Disburse	ement For: Primary General Other (specify) ▼									

SUBTOTAL of Disbursements This Page (optional)	•	1250.00
TOTAL This Period (last page this line number only)	•	3700.00

State: AZ

District: 21