



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Blue Cross and Blue Shield of Kansas PAC

Report Covering the Period: From: 

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		6227.65
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	7656.04									
(c) Total Receipts (from Line 19) .....	980.18	13182.57								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	8636.22	19410.22								
7. Total Disbursements (from Line 31) .....	1684.00	12458.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	6952.22	6952.22								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Blue Cross and Blue Shield of Kansas PAC

Report Covering the Period: From: 

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	593.00	4362.50
(i) Itemized (use Schedule A) .....	372.50	8736.50
(ii) Unitemized .....	965.50	13099.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	965.50	13099.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	14.68	83.57
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)) .....	980.18	13182.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	980.18	13182.57

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	684.00	8208.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	4250.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1684.00	12458.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	1684.00	12458.00

**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) .....	965.50	13099.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	965.50	13099.00
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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of Kansas PAC

Full Name (Last, First, Middle Initial) <b>A. Graham Bailey</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 2704 Westdale Circle		Transaction ID: SA11A1.4346	
City State Zip Code Lawrence KS 66049	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. <b>C</b>		\$20 per 2 pay periods	
Name of Employer BCBSKS	Occupation VP, Corp Comm & Public Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00		

Full Name (Last, First, Middle Initial) <b>B. Darrel Brake</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 6017 SW 38th		Transaction ID: SA11A1.4334	
City State Zip Code Topeka KS 66610	Amount of Each Receipt this Period 22.00		
FEC ID number of contributing federal political committee. <b>C</b>		\$11 per 2 pay periods	
Name of Employer BCBSKS	Occupation Dir, Member Service Appl.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 286.00		

Full Name (Last, First, Middle Initial) <b>C. Mary Cochran</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 257 N Broadway		Transaction ID: SA11A1.4331	
City State Zip Code Wichita KS 67202	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>		\$15 per 2 pay periods	
Name of Employer BCBSKS	Occupation Group Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	92.00
<b>TOTAL</b> 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: (check only one)	PAGE 7 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of Kansas PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Andrew Corbin		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 6337 SW Hodges Road		Transaction ID: SA11A1.4328
City Auburn	State KS	Amount of Each Receipt this Period 40.00
Zip Code 66402		\$20 per 2 pay periods
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer BCBSKS	Occupation VP, Ext. Sales & Provider Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Thomas Covert		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 5445 SW Urish Rd		Transaction ID: SA11A1.4329
City Topeka	State KS	Amount of Each Receipt this Period 24.00
Zip Code 66610		\$12 per 2 pay periods
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer BCBSKS	Occupation Corporate Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Donald Daniels		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 7209 SW Palace Drive		Transaction ID: SA11A1.4336
City Topeka	State KS	Amount of Each Receipt this Period 20.00
Zip Code 66610		\$10 per 2 pay periods
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer BCBSKS	Occupation Project Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	84.00
<b>TOTAL</b> 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: (check only one)	PAGE 8 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of Kansas PAC

**A.** Full Name (Last, First, Middle Initial)  
Roni Davis-Watson

Mailing Address 3121 SW Belle Ave

City State Zip Code  
Topeka KS 66614

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

Name of Employer BCBSKS Occupation Dir, Mkt Research/Prod Devel.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.4332

Amount of Each Receipt this Period  
20.00

\$10 per 2 pay periods

**B.** Full Name (Last, First, Middle Initial)  
Rusty Doty

Mailing Address 4611 SE Paulen Rd

City State Zip Code  
Berryton KS 66409

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

Name of Employer BCBSKS Occupation Manager, Professional Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.4330

Amount of Each Receipt this Period  
18.00

\$9 per 2 pay periods

**C.** Full Name (Last, First, Middle Initial)  
Beryl Lowery-Born

Mailing Address 1172 College

City State Zip Code  
Topeka KS 66604

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

Name of Employer BCBSKS Occupation Vice President, Finance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.4337

Amount of Each Receipt this Period  
40.00

\$20 per 2 pay periods

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	78.00
<b>TOTAL</b> 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: (check only one)	PAGE 9 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of Kansas PAC

Full Name (Last, First, Middle Initial) <b>A. Michael Mattox</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 2413 SW Pepperwood Rd.		Transaction ID: SA11A1.4325	
City State Zip Code Topeka KS 66614	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. <b>C</b>		\$20 per 2 pay periods	
Name of Employer BCBSKS	Occupation President & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00		

Full Name (Last, First, Middle Initial) <b>B. Rose Ann Morrow</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 3920 SW 39th Terr		Transaction ID: SA11A1.4322	
City State Zip Code Topeka KS 66610	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>		\$10 per 2 pay periods	
Name of Employer BCBSKS	Occupation Mgr, Special Group Claims		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name (Last, First, Middle Initial) <b>C. Frederick Palenske</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 6225 Vorse Rd		Transaction ID: SA11A1.4339	
City State Zip Code Auburn KS 66402	Amount of Each Receipt this Period 27.00		
FEC ID number of contributing federal political committee. <b>C</b>		\$13.50 per 2 pay periods	
Name of Employer BCBSKS	Occupation Director, Government Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	87.00
<b>TOTAL</b> This Period (last page this line number only) .....	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of Kansas PAC

Full Name (Last, First, Middle Initial) <b>A.</b> William Pitsenberger		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 1800 Oakley		Transaction ID: SA11A1.4340
City State Zip Code Topeka KS 66604	Amount of Each Receipt this Period 42.00	
FEC ID number of contributing federal political committee. <b>C</b>		\$21 per 2 pay periods
Name of Employer BCBSKS	Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 546.00	

Full Name (Last, First, Middle Initial) <b>B.</b> John Reedy		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 5722 West 27th		Transaction ID: SA11A1.4335
City State Zip Code Topeka KS 66614	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		\$10 per 2 pay periods
Name of Employer BCBSKS	Occupation Manager, Systems Support	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Charlotte Richards		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 8184 Cheyenne Way		Transaction ID: SA11A1.4326
City State Zip Code Ozawkie KS 66070	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		\$10 per 2 pay periods
Name of Employer BCBSKS	Occupation Dir, Medical Tech	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	82.00
<b>TOTAL</b> 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: (check only one)	PAGE 11 / 14
	<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 and Blue Shield of Kansas PAC

**A.** Full Name (Last, First, Middle Initial)  
Steven Rolin

Mailing Address 3805 SW Marion Lane

City State Zip Code  
Topeka KS 66618

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

Name of Employer BCBSKS Occupation Senior Systems Analyst

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.4324

Amount of Each Receipt this Period  
18.00

\$9 per 2 pay periods

**B.** Full Name (Last, First, Middle Initial)  
Ronald Simmons

Mailing Address 2700 SE Culvier

City State Zip Code  
Topeka KS 66604

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

Name of Employer BCBSKS Occupation Controller

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.4338

Amount of Each Receipt this Period  
26.00

\$13 per 2 pay periods

**C.** Full Name (Last, First, Middle Initial)  
William J Wallace

Mailing Address 2400 NW 44th

City State Zip Code  
Topeka KS 66618

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

Name of Employer BCBSKS Occupation VP, Information Services

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.4333

Amount of Each Receipt this Period  
40.00

\$20 per 2 pay periods

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	84.00
<b>TOTAL</b> 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 / 14
	(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 and Blue Shield of Kansas PAC

**A.** Full Name (Last, First, Middle Initial)  
Leslie Watson

Mailing Address 3121 SW Belle

City State Zip Code  
Topeka KS 66614

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

Name of Employer Occupation  
BCBSKS Dir, Payment Safeguards

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
468.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 6

**Transaction ID:** SA11A1.4323

Amount of Each Receipt this Period  
36.00

\$18 per 2 pay periods

**B.** Full Name (Last, First, Middle Initial)  
Ralph Weber II

Mailing Address 9526 SE Ratner Road

City State Zip Code  
Berryton KS 66409

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

Name of Employer Occupation  
BCBSKS VP, Medical Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 6

**Transaction ID:** SA11A1.4327

Amount of Each Receipt this Period  
50.00

\$25 per 2 pay periods

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>86.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>593.00</b>

# 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 13 / 14

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

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of Kansas PAC

Full Name (Last, First, Middle Initial) <b>A. BluePac</b>		<b>Transaction ID: SB22.4343</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 6	
Mailing Address 1310 G Street, N.W.		Amount of Each Disbursement this Period 684.00	
City Washington	State DC	Zip Code 20005	Category/ Type
Purpose of Disbursement Nov. contribution			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	<b>684.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<b>684.00</b>

**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)

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<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 and Blue Shield of Kansas PAC

Full Name (Last, First, Middle Initial)  
**A. NANCY E BOYDA**

Transaction ID: SB23.4345

Date of Disbursement

Mailing Address 5081/2 SW 10TH STREET

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	7		2	0	0	6

City TOPEKA State KS Zip Code 66612

Amount of Each Disbursement this Period

1000.00
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Purpose of Disbursement  
Contribution

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Candidate Name  
NANCY E BOYDA

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: KS District: 02

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

1000.00
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**TOTAL** This Period (last page this line number only) ..... ►

1000.00
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