

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

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

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00340364

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day **PRE**-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |

Election on _____ in the State of _____

- (d) 30-Day **Post**-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 11 25 2008 through 12 31 2008

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 Emily Glidden

Signature of Treasurer Electronically Filed by Emily Glidden Date 04 09 2010

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

Office Use Only							
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		65707.70
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	74476.58									
(c) Total Receipts (from Line 19)	8604.25	106601.08								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	83080.83	172308.78								
7. Total Disbursements (from Line 31)	119.67	89347.62								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	82961.16	82961.16								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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)	7549.75	74135.63
(ii) Unitemized	1054.50	32465.45
(iii) TOTAL (add Lines 11(a)(i) and (ii)	8604.25	106601.08
(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)	8604.25	106601.08
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.)	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))	8604.25	106601.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	8604.25	106601.08

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	89000.00
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.....	119.67	347.62
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))..	119.67	89347.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	119.67	89347.62

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	8604.25	106601.08
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8604.25	106601.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 56
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Salim Alama

Mailing Address 116125
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 Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.8914

Amount of Each Receipt this Period
50.00

Payroll contribution per cycle \$25.00

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

Mailing Address emp 109049
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 Employee

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 8

Transaction ID: SA11AI.8915

Amount of Each Receipt this Period
40.00

Payroll contribution per cycle \$20

C. Full Name (Last, First, Middle Initial)
Dennis Alva

Mailing Address emp 109311
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 Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 494.77

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.8916

Amount of Each Receipt this Period
38.34

Payroll contribution per cycle \$19.17

SUBTOTAL of Receipts This Page (optional) ► **128.34**

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 / 56
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) David A Arnold Jr.		Date of Receipt
	Mailing Address 114648 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8918
Name of Employer Blue Shield		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	50.00
		Payroll contribution per cycle \$25.00	

B.	Full Name (Last, First, Middle Initial) Tanya Ballow		Date of Receipt
	Mailing Address 108347 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8921
Name of Employer Blue Shield of California		Occupation employee # 108347	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 585.00	45.00
		Payroll contribution per cycle \$22.50	

C.	Full Name (Last, First, Middle Initial) Bret Balousek		Date of Receipt
	Mailing Address 115527 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8922
Name of Employer Blue Shield of California		Occupation employee # 115527	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00	30.00
		Payroll contribution per cycle \$15	

SUBTOTAL of Receipts This Page (optional)	125.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 56
(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)
Patrick Banghart

Mailing Address 115427
50 Beale Street

City State Zip Code
San Francisco CA 94105

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

Name of Employer Occupation
Blue Shield of California Employee

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: SA11AI.8923

Amount of Each Receipt this Period
20.00

Payroll contribution per cycle \$10.00

B. Full Name (Last, First, Middle Initial)
Tracy Barnes

Mailing Address emp 22076
50 Beale Street

City State Zip Code
San Francisco CA 94105

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

Name of Employer Occupation
Blue Shield of California Employee

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: SA11AI.8924

Amount of Each Receipt this Period
30.00

Payroll contribution per cycle \$15.00

C. Full Name (Last, First, Middle Initial)
Vivek Bhatia

Mailing Address emp 113173
50 Beale Street

City State Zip Code
San Francisco CA 94105

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

Name of Employer Occupation
Blue Shield of California Employee

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: SA11AI.8927

Amount of Each Receipt this Period
20.00

Payroll contribution per cycle \$10.00

SUBTOTAL of Receipts This Page (optional) ▶ **70.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 56
(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)
 Douglas Biehn
 Mailing Address emp 112903, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8928
 Amount of Each Receipt this Period 40.00
 Payroll contribution per cycle \$20.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield Occupation employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

B. Full Name (Last, First, Middle Initial)
 Bruce Bodaken
 Mailing Address emp 16451 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8929
 Amount of Each Receipt this Period 120.00
 Payroll contribution per cycle \$60.00
 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 ▼ 1560.00

C. Full Name (Last, First, Middle Initial)
 Shirley Bolden
 Mailing Address emp 016540, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8930
 Amount of Each Receipt this Period 19.24
 Payroll contribution per cycle \$9.62
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield Occupation employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.12

SUBTOTAL of Receipts This Page (optional) ► **179.24**
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 10 / 56
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Thomas Borchelt		Date of Receipt
	Mailing Address 115465 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City State Zip Code San Francisco CA 94105		Transaction ID: SA11AI.8931
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
	Name of Employer Occupation Blue Shield of California employee		Payroll contribution per cycle \$22.50
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 585.00		

B.	Full Name (Last, First, Middle Initial) John Bradley		Date of Receipt
	Mailing Address 114962 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City State Zip Code San Francisco CA 94105		Transaction ID: SA11AI.8933
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Occupation Blue Shield of California employee		Payroll contribution per cycle \$10.00
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		

C.	Full Name (Last, First, Middle Initial) Ruta Britts		Date of Receipt
	Mailing Address 112060 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City State Zip Code San Francisco CA 94105		Transaction ID: SA11AI.8934
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
	Name of Employer Occupation Blue Shield employee		Payroll contribution per cycle \$20.00
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)	105.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 56
(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.

Full Name (Last, First, Middle Initial)
Linda Bronson

Mailing Address emp 114382, 50 Beale Street

City State Zip Code
San Francisco CA 94105

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

Name of Employer Blue Cross Occupation employee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.8936

Amount of Each Receipt this Period 30.00

Payroll contribution per cycle \$15.00

B.

Full Name (Last, First, Middle Initial)
Thomas Brophy

Mailing Address emp 114076, 50 Beale Street

City State Zip Code
San Francisco CA 94105

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

Name of Employer Blue Cross Occupation employee

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 8

Transaction ID: SA11AI.8937

Amount of Each Receipt this Period 40.00

Payroll contribution per cycle \$20.00

C.

Full Name (Last, First, Middle Initial)
William Brown

Mailing Address emp 059004, 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 Occupation employee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 602.84

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.8938

Amount of Each Receipt this Period 46.88

Payroll contribution per cycle \$23.44

SUBTOTAL of Receipts This Page (optional) ► **116.88**

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 / 56
(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)
 Michael-Anne Browne
 Mailing Address emp 111514
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8939
 Amount of Each Receipt this Period 50.00
 Payroll contribution per cycle \$25.00
 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 ▼ 650.00

B. Full Name (Last, First, Middle Initial)
 Sue Burke
 Mailing Address 054016
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8940
 Amount of Each Receipt this Period 20.00
 Payroll contribution per cycle \$10.00
 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 ▼ 260.00

C. Full Name (Last, First, Middle Initial)
 Michele Carrillo
 Mailing Address emp 112162, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8942
 Amount of Each Receipt this Period 20.00
 Payroll contribution per cycle \$10.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield Occupation employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

SUBTOTAL of Receipts This Page (optional) ► **90.00**
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 13 / 56
(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)
 Wendy Cerruti
 Mailing Address emp 112821, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8944
 Amount of Each Receipt this Period 100.00
 Payroll contribution per cycle \$50.00
 Name of Employer Blue Shield Occupation employee
 FEC ID number of contributing federal political committee. **C**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

B. Full Name (Last, First, Middle Initial)
 George R. Chadwell
 Mailing Address emp 110628 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8945
 Amount of Each Receipt this Period 26.88
 Payroll contribution per cycle \$13.44
 Name of Employer Blue Shield of California Occupation Employee
 FEC ID number of contributing federal political committee. **C**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 347.49

C. Full Name (Last, First, Middle Initial)
 Deborah Chase
 Mailing Address emp 114029, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8946
 Amount of Each Receipt this Period 40.00
 Payroll contribution per cycle \$20.00
 Name of Employer Blue Shield Occupation employee
 FEC ID number of contributing federal political committee. **C**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

SUBTOTAL of Receipts This Page (optional) ► 166.88
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 56
	<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.	Full Name (Last, First, Middle Initial) Denise Ciuffo	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 054063, 50 Beale Street	Transaction ID: SA11AI.8947
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Blue Shield Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00	

B.	Full Name (Last, First, Middle Initial) Bruce Cohen	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 095327, 50 Beale Street	Transaction ID: SA11AI.8948
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$20.00
	Name of Employer Blue Shield Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00	

C.	Full Name (Last, First, Middle Initial) Vincent Coppola	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 115946 50 Beale Street	Transaction ID: SA11AI.8950
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$30.00
	Name of Employer Blue Shield of California Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 780.00	

SUBTOTAL of Receipts This Page (optional)	120.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 15 / 56
(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)
Edward Cymerys

Mailing Address emp 114609, 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 Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 12 / 31 / 2008

Transaction ID: SA11AI.8952

Amount of Each Receipt this Period 200.00

Payroll contribution per cycle \$100.00

B. Full Name (Last, First, Middle Initial)
Susan Deleeuw

Mailing Address 114798 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 employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt 12 / 31 / 2008

Transaction ID: SA11AI.8955

Amount of Each Receipt this Period 45.00

Payroll contribution per cycle \$22.50

C. Full Name (Last, First, Middle Initial)
Ann DeRose

Mailing Address 113203 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 employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt 12 / 31 / 2008

Transaction ID: SA11AI.8956

Amount of Each Receipt this Period 45.00

Payroll contribution per cycle \$22.50

SUBTOTAL of Receipts This Page (optional) ► 290.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 56

(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.	Full Name (Last, First, Middle Initial) Tushar Desai		Date of Receipt
	Mailing Address 115087 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8957
Name of Employer Blue Shield of California		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 585.00	<input type="text" value="45.00"/>
		Payroll contribution per cycle \$22.50	

B.	Full Name (Last, First, Middle Initial) James DiFalco		Date of Receipt
	Mailing Address 112748 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8958
Name of Employer Blue Shield of California		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text" value="20.00"/>
		Payroll contribution per cycle \$10.00	

C.	Full Name (Last, First, Middle Initial) Patricia R. Domenickine		Date of Receipt
	Mailing Address emp 111504 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8959
Name of Employer Blue Shield of California		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 679.11	<input type="text" value="52.72"/>
		Payroll contribution per cycle \$26.36	

SUBTOTAL of Receipts This Page (optional) ▶

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 56
	<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.	Full Name (Last, First, Middle Initial) Marjorie Drake	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 56271 50 Beale Street	Transaction ID: SA11AI.8963
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Occupation Blue Shield of California IFP Underwriting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) James Elliott	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 115549 50 Beale Street	Transaction ID: SA11AI.8964
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$100.00
	Name of Employer Occupation Blue Shield of California employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00	

C.	Full Name (Last, First, Middle Initial) Thomas Epstein	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 110249 50 Beale Street	Transaction ID: SA11AI.8966
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$60.00
	Name of Employer Occupation Blue Shield of California Vice President, Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1560.00	

SUBTOTAL of Receipts This Page (optional)	340.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 56
(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.

Full Name (Last, First, Middle Initial) Jacqueline Espinoza		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 115623 50 Beale Street		Transaction ID: SA11AI.8967
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$22.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

B.

Full Name (Last, First, Middle Initial) Kathryn M. Ferguson		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address emp 32319 50 Beale Street		Transaction ID: SA11AI.8968
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 34.00
Name of Employer Blue Shield of California	Occupation Employee	Payroll contribution per cycle \$17.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

C.

Full Name (Last, First, Middle Initial) Carol Fogelman		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address emp 32239 50 Beale Street		Transaction ID: SA11AI.8969
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.06
Name of Employer Blue Shield of California	Occupation Employee	Payroll contribution per cycle \$13.03
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 308.93	

SUBTOTAL of Receipts This Page (optional)	105.06
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 19 / 56
(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.

Full Name (Last, First, Middle Initial) Joseph Foley		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 114742 50 Beale Street		Transaction ID: SA11AI.8970
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.80
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$11.90
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 309.51	

B.

Full Name (Last, First, Middle Initial) George A Gardner		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 115931 50 Beale Street		Transaction ID: SA11AI.8971
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Blue Shield	Occupation Employee	Payroll contribution per cycle \$25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

C.

Full Name (Last, First, Middle Initial) Mark Gastineau		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 115296 50 Beale Street		Transaction ID: SA11AI.8972
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1040.00	

SUBTOTAL of Receipts This Page (optional)	153.80
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 56
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Robert Geyer	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 42026 50 Beale Street	Transaction ID: SA11AI.8975
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$40.00
	Name of Employer Occupation Blue Shield of California Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1040.00	

B.	Full Name (Last, First, Middle Initial) Lisa Ghotbi	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 108225 50 Beale Street	Transaction ID: SA11AI.8976
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$100.00
	Name of Employer Occupation Blue Shield of California Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

C.	Full Name (Last, First, Middle Initial) Ketan Gima	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 112246 50 Beale Street	Transaction ID: SA11AI.8977
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$50.00
	Name of Employer Occupation Blue Shield of California Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional)	380.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 56
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Deborah Gordon		Date of Receipt MM / DD / YYYY 12 / 31 / 2008		
	Mailing Address 115621 50 Beale Street		Transaction ID: SA11AI.8978		
	City San Francisco	State CA	Zip Code 94105	Amount of Each Receipt this Period 45.00	
	FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$22.50		
	Name of Employer Blue Shield of California	Occupation employee	Aggregate Year-to-Date 585.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Christopher Gorecki		Date of Receipt MM / DD / YYYY 12 / 31 / 2008		
	Mailing Address 115257 50 Beale Street		Transaction ID: SA11AI.8979		
	City San Francisco	State CA	Zip Code 94105	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$10.00		
	Name of Employer Blue Shield of California	Occupation employee	Aggregate Year-to-Date 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Douglas Grant		Date of Receipt MM / DD / YYYY 12 / 31 / 2008		
	Mailing Address emp 27417 50 Beale Street		Transaction ID: SA11AI.8980		
	City San Francisco	State CA	Zip Code 94105	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$10.00		
	Name of Employer Blue Shield of California	Occupation Director	Aggregate Year-to-Date 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	▶	85.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 56
(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.

Full Name (Last, First, Middle Initial) Christy Gregg		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 022233 50 Beale Street		Transaction ID: SA11AI.8981
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$22.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

B.

Full Name (Last, First, Middle Initial) Melissa Hall		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 115540 50 Beale Street		Transaction ID: SA11AI.8983
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$22.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

C.

Full Name (Last, First, Middle Initial) Robert Harjo		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address emp 16340 50 Beale Street		Transaction ID: SA11AI.8986
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Blue Shield of California	Occupation Employee	Payroll contribution per cycle \$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	110.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 23 / 56
(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)
Jeffrey Hermosillo

Mailing Address 114845
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 employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8990
Amount of Each Receipt this Period 45.00
Payroll contribution per cycle \$22.50

B. Full Name (Last, First, Middle Initial)
Brent Hitchings

Mailing Address 115569
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 employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8993
Amount of Each Receipt this Period 45.00
Payroll contribution per cycle \$22.50

C. Full Name (Last, First, Middle Initial)
Helena Hoffman

Mailing Address emp 95671
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 Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 286.00

Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8995
Amount of Each Receipt this Period 22.00
Payroll contribution per cycle \$11.00

SUBTOTAL of Receipts This Page (optional) ► 112.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 56

(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) Stanford Hornbacher		Date of Receipt
	Mailing Address 016615 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8997
Name of Employer Blue Shield of California		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 585.00	<input type="text" value="45.00"/>
		Payroll contribution per cycle \$22.50	

B.	Full Name (Last, First, Middle Initial) Diana Huang		Date of Receipt
	Mailing Address emp 114587, 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8998
Name of Employer Blue Shield		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text" value="20.00"/>
		Payroll contribution per cycle \$10.00	

C.	Full Name (Last, First, Middle Initial) Tony R. Ibarra		Date of Receipt
	Mailing Address emp 112981 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9000
Name of Employer Blue Shield of California		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00	<input type="text" value="30.00"/>
		Payroll contribution per cycle \$15.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="95.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 56
	<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.	Full Name (Last, First, Middle Initial) Marianne Jackson	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 112372 50 Beale Street	Transaction ID: SA11AI.9002
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 160.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$80.00
	Name of Employer Occupation Blue Shield of California Senior Vice President, Human Resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1851.97	

B.	Full Name (Last, First, Middle Initial) Seth Jacobs	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 16574 50 Beale Street	Transaction ID: SA11AI.9003
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Occupation Blue Shield of California Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

C.	Full Name (Last, First, Middle Initial) Kathryn Jefcoat	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 95114 50 Beale Street	Transaction ID: SA11AI.9005
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Occupation Blue Shield of California Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	225.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 26 / 56
(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)
 Michael Johnson

Mailing Address emp 111769
 50 Beale Street

City State Zip Code
 San Francisco CA 94105

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

Name of Employer Occupation
 Blue Shield of California Employee

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 493.21

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9006

Amount of Each Receipt this Period
 39.40

Payroll contribution per cycle \$19.70

B. Full Name (Last, First, Middle Initial)
 David Joyner

Mailing Address emp 19639
 50 Beale Street

City State Zip Code
 San Francisco CA 94105

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

Name of Employer Occupation
 Blue Shield of California Vice President

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1040.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9008

Amount of Each Receipt this Period
 80.00

Payroll contribution per cycle \$40.00

C. Full Name (Last, First, Middle Initial)
 Allison Kawamoto

Mailing Address 094997
 50 Beale Street

City State Zip Code
 San Francisco CA 94105

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

Name of Employer Occupation
 Blue Shield of California employee

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 323.57

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9011

Amount of Each Receipt this Period
 26.42

Payroll contribution per cycle \$13.21

SUBTOTAL of Receipts This Page (optional) ► **145.82**

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 27 / 56
(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.

Full Name (Last, First, Middle Initial) Amna Khan-Mirza		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 113797 50 Beale Street		Transaction ID: SA11AI.9012
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Blue Shield	Occupation Employee	Payroll contribution per cycle \$15.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

B.

Full Name (Last, First, Middle Initial) Tina Kibler		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 115267 50 Beale Street		Transaction ID: SA11AI.9013
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$22.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

C.

Full Name (Last, First, Middle Initial) Yun Kim		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address emp 109394 50 Beale Street		Transaction ID: SA11AI.9014
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Blue Shield of California	Occupation Employee	Payroll contribution per cycle \$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	▶	95.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 56
	<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.	Full Name (Last, First, Middle Initial) Heidi Kunz	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 112238 50 Beale Street	Transaction ID: SA11AI.9015
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 235.50
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$117.75
	Name of Employer Occupation Blue Shield of California Chief Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3039.60	

B.	Full Name (Last, First, Middle Initial) Nora Lam	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 015642 50 Beale Street	Transaction ID: SA11AI.9016
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$15.00
	Name of Employer Occupation Blue Shield of California employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

C.	Full Name (Last, First, Middle Initial) Lisa Lambert	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 062157, 50 Beale Street	Transaction ID: SA11AI.9017
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Occupation Blue Shield employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	▶	285.50
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 29 / 56
(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.

Full Name (Last, First, Middle Initial) Janice A Lea		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 112048 50 Beale Street		Transaction ID: SA11AI.9021
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Blue Shield	Occupation Employee	Payroll contribution per cycle \$25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

B.

Full Name (Last, First, Middle Initial) Janice Levinsky		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 111653 50 Beale Street		Transaction ID: SA11AI.9024
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$15.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

C.

Full Name (Last, First, Middle Initial) Laura Lewis		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 50 Beale Street		Transaction ID: SA11AI.9027
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer Blue Shield of California	Occupation employee # 022384	Payroll contribution per cycle \$22.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

SUBTOTAL of Receipts This Page (optional)	125.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 56
	<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.	Full Name (Last, First, Middle Initial) Anthony Lipp		Date of Receipt
	Mailing Address 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9028
Name of Employer Blue Shield of California		Occupation employee # 004138	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="585.00"/>	<input type="text" value="45.00"/>
		Payroll contribution per cycle \$22.50	

B.	Full Name (Last, First, Middle Initial) Louis Lombardo		Date of Receipt
	Mailing Address emp 15859 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9029
Name of Employer Blue Shield of California		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="585.00"/>	<input type="text" value="45.00"/>
		Payroll contribution per cycle \$22.50	

C.	Full Name (Last, First, Middle Initial) Christopher Long		Date of Receipt
	Mailing Address emp 109838 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9030
Name of Employer Blue Shield of California		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="466.50"/>	<input type="text" value="36.40"/>
		Payroll contribution per cycle \$18.20	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="126.40"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 56
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Melissa Loura	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 50 Beale Street	Transaction ID: SA11AI.9031
	City San Francisco State CA Zip Code 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Blue Shield of California Occupation employee # 026790 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) Kathleen M. Lucke	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 111911 50 Beale Street	Transaction ID: SA11AI.9032
	City San Francisco State CA Zip Code 94105	Amount of Each Receipt this Period 58.32
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$29.16
	Name of Employer Blue Shield of California Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 724.97	

C.	Full Name (Last, First, Middle Initial) Michael Lujan	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 112179 50 Beale Street	Transaction ID: SA11AI.9034
	City San Francisco State CA Zip Code 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Blue Shield of California Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	128.32
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 56
	<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.	Full Name (Last, First, Middle Initial) Kathleen Lynaugh	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 109411 50 Beale Street	Transaction ID: SA11AI.9036
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$30.00
	Name of Employer Occupation Blue Shield of California Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

B.	Full Name (Last, First, Middle Initial) Elinor Mackinnon	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 113314, 50 Beale Street	Transaction ID: SA11AI.9037
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$50.00
	Name of Employer Occupation Blue Shield employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

C.	Full Name (Last, First, Middle Initial) Fred J. Mann	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 61151 50 Beale Street	Transaction ID: SA11AI.9038
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Occupation Blue Shield of California Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	180.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 33 / 56
(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)
 Paul Markovich
 Mailing Address emp 16510
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.9039
 Amount of Each Receipt this Period 154.00
 Payroll contribution per cycle \$77.00
 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 ▼ 2002.00

B. Full Name (Last, First, Middle Initial)
 Thomas McCaffery
 Mailing Address 115792
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.9041
 Amount of Each Receipt this Period 60.00
 Payroll contribution per cycle \$30.00
 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 ▼ 570.00

C. Full Name (Last, First, Middle Initial)
 Shelley McFarland
 Mailing Address emp 061236, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.9043
 Amount of Each Receipt this Period 17.06
 Payroll contribution per cycle \$8.53
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield Occupation employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 219.63

SUBTOTAL of Receipts This Page (optional) ► **231.06**
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 34 / 56
(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)
Lorie Merrill

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 employee # 095447

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 585.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	8

Transaction ID: SA11AI.9044

Amount of Each Receipt this Period
45.00

Payroll contribution per cycle \$22.50

B. Full Name (Last, First, Middle Initial)
David Morris

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 employee # 114117

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	8

Transaction ID: SA11AI.9046

Amount of Each Receipt this Period
20.00

Payroll contribution per cycle \$10.00

C. Full Name (Last, First, Middle Initial)
Cathleen Murphy

Mailing Address emp 113067, 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 Occupation employee

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	8

Transaction ID: SA11AI.9047

Amount of Each Receipt this Period
50.00

Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional) ► **115.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 56
	<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.	Full Name (Last, First, Middle Initial) Jon Murphy	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 112151 50 Beale Street	Transaction ID: SA11AI.9048
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 26.96
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$13.48
	Name of Employer Occupation Blue Shield of California Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 361.00	

B.	Full Name (Last, First, Middle Initial) Debbie Naegle	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 16484 50 Beale Street	Transaction ID: SA11AI.9049
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 67.39
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$33.70
	Name of Employer Occupation Blue Shield of California Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 871.56	

C.	Full Name (Last, First, Middle Initial) Paul Nicknig	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 50 Beale Street	Transaction ID: SA11AI.9050
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Occupation Blue Shield of California employee # 112383	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

SUBTOTAL of Receipts This Page (optional)	139.35
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 56
	<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.	Full Name (Last, First, Middle Initial) Robert Novelli	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 111112 50 Beale Street	Transaction ID: SA11AI.9051
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 145.14
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$72.57
	Name of Employer Occupation Blue Shield of California Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1873.42	

B.	Full Name (Last, First, Middle Initial) Christine Orr	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address Employee # 040096 50 Beale Street	Transaction ID: SA11AI.9054
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Occupation Blue Shield of California	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

C.	Full Name (Last, First, Middle Initial) Jenni Owens	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 032219 50 Beale Street	Transaction ID: SA11AI.9055
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Occupation Blue Shield of California employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional)	245.14
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 37 / 56

(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.	Full Name (Last, First, Middle Initial) William Panek		Date of Receipt																				
	Mailing Address emp 18535 50 Beale Street		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y													
	1	2		3	1		2	0	0	8													
	City State Zip Code San Francisco CA 94105		Transaction ID: SA11AI.9058																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00																					
Name of Employer Occupation Blue Shield of California Medical Director		Payroll contribution per cycle \$10.00																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00																					

B.	Full Name (Last, First, Middle Initial) Jeffrey Passaro		Date of Receipt																				
	Mailing Address emp 018615 50 Beale Street		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y													
	1	2		3	1		2	0	0	8													
	City State Zip Code San Francisco CA 94105		Transaction ID: SA11AI.9086																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00																					
Name of Employer Occupation Blue Shield of California employee		Payroll contribution per cycle \$15.00																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00																					

C.	Full Name (Last, First, Middle Initial) Kimberley Reed		Date of Receipt																				
	Mailing Address emp 109736 50 Beale Street		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y													
	1	2		3	1		2	0	0	8													
	City State Zip Code San Francisco CA 94105		Transaction ID: SA11AI.9095																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00																					
Name of Employer Occupation Blue Shield of California employee		Payroll contribution per cycle \$25.00																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00																					

SUBTOTAL of Receipts This Page (optional)	100.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 38 / 56

(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.

Full Name (Last, First, Middle Initial)
Julie Reid

Mailing Address emp 032370
50 Beale Street

City State Zip Code
San Francisco CA 94105

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

Name of Employer Occupation
Blue Shield of California employee

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9096

Amount of Each Receipt this Period
50.00

Payroll contribution per cycle \$25.00

B.

Full Name (Last, First, Middle Initial)
Diana Reynolds

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 Occupation
Blue Shield of California employee # 115295

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
292.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9098

Amount of Each Receipt this Period
22.50

Payroll contribution per cycle \$11.25

C.

Full Name (Last, First, Middle Initial)
Kathy Richards

Mailing Address emp 109053
50 Beale Street

City State Zip Code
San Francisco CA 94105

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

Name of Employer Occupation
Blue Shield of California Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9099

Amount of Each Receipt this Period
100.00

Payroll contribution per cycle \$50.00

SUBTOTAL of Receipts This Page (optional) ▶

172.50

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 39 / 56

(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.

Full Name (Last, First, Middle Initial)
Mika D. Riedinger

Mailing Address emp 27156
50 Beale Street

City State Zip Code
San Francisco CA 94105

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

Name of Employer Occupation
Blue Shield of California Employee

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 478.24

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9100

Amount of Each Receipt this Period
36.88

Payroll contribution per cycle \$18.44

B.

Full Name (Last, First, Middle Initial)
Karen Rinaldi

Mailing Address emp 111645
50 Beale Street

City State Zip Code
San Francisco CA 94105

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

Name of Employer Occupation
Blue Shield of California Employee

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.95

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9101

Amount of Each Receipt this Period
25.50

Payroll contribution per cycle \$12.75

C.

Full Name (Last, First, Middle Initial)
Thad Roake

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 Occupation
Blue Shield of California employee # 115536

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3949.82

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9102

Amount of Each Receipt this Period
246.14

Payroll contribution per cycle \$60.57

SUBTOTAL of Receipts This Page (optional) ▶

308.52

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 40 / 56
(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.

Full Name (Last, First, Middle Initial)
Julie Roberts

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 employee # 113789

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 31 / 2008

Transaction ID: SA11AI.9103

Amount of Each Receipt this Period
20.00

Payroll contribution per cycle \$10.00

B.

Full Name (Last, First, Middle Initial)
Norvita Robinson

Mailing Address emp 111723, 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 Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 31 / 2008

Transaction ID: SA11AI.9104

Amount of Each Receipt this Period
20.00

Payroll contribution per cycle \$10.00

C.

Full Name (Last, First, Middle Initial)
Garry Ronco

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 employee # 115653

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 31 / 2008

Transaction ID: SA11AI.9105

Amount of Each Receipt this Period
45.00

Payroll contribution per cycle \$22.50

SUBTOTAL of Receipts This Page (optional) ▶ **85.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 56
(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. Full Name (Last, First, Middle Initial)
Martha Saafir

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 employee # 095645

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: MM / DD / YYYY
12 / 31 / 2008

Transaction ID: SA11AI.9106

Amount of Each Receipt this Period: 20.00

Payroll contribution per cycle \$10.00

B. Full Name (Last, First, Middle Initial)
Mark Sachs

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 employee # 114287

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt: MM / DD / YYYY
12 / 31 / 2008

Transaction ID: SA11AI.9107

Amount of Each Receipt this Period: 30.00

Payroll contribution per cycle \$15.00

C. Full Name (Last, First, Middle Initial)
Joseph Safran

Mailing Address emp 109164, 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 Occupation employee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: MM / DD / YYYY
12 / 31 / 2008

Transaction ID: SA11AI.9108

Amount of Each Receipt this Period: 40.00

Payroll contribution per cycle \$20.00

SUBTOTAL of Receipts This Page (optional) ▶ **90.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 56
(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.

Full Name (Last, First, Middle Initial) Richard Salow		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 50 Beale Street		Transaction ID: SA11AI.9109
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Blue Shield of California	Occupation employee # 115516	Payroll contribution per cycle \$25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 485.00	

B.

Full Name (Last, First, Middle Initial) Lauri Satterwhaite		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address emp 29223 50 Beale Street		Transaction ID: SA11AI.9111
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Blue Shield of California	Occupation Employee	Payroll contribution per cycle \$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

C.

Full Name (Last, First, Middle Initial) Derek Schneider		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address emp 116208 50 Beale Street		Transaction ID: SA11AI.9113
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 56
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Christopher K. Seides		Date of Receipt
	Mailing Address emp 95748 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9114
Name of Employer Blue Shield of California		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 410.00	<input type="text"/> 40.00
		Payroll contribution per cycle \$20.00	

B.	Full Name (Last, First, Middle Initial) Jason Sims		Date of Receipt
	Mailing Address 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9116
Name of Employer Blue Shield of California		Occupation employee # 112432	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00	<input type="text"/> 30.00
		Payroll contribution per cycle \$15.00	

C.	Full Name (Last, First, Middle Initial) Deborah Smith		Date of Receipt
	Mailing Address 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9117
Name of Employer Blue Shield of California		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 429.00	<input type="text"/> 33.00
		Payroll contribution per cycle \$16.50	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 103.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 56

(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.

Full Name (Last, First, Middle Initial)

Alan Sokolow

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
employee # 115614

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 31 / 2008

Transaction ID: SA11AI.9118

Amount of Each Receipt this Period

100.00

Payroll contribution per cycle \$50.00

B.

Full Name (Last, First, Middle Initial)

Robert Spector

Mailing Address emp 114420, 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

Occupation
employee

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

532.38

Date of Receipt

M M / D D / Y Y Y Y
12 / 31 / 2008

Transaction ID: SA11AI.9121

Amount of Each Receipt this Period

43.06

Payroll contribution per cycle \$20.78

C.

Full Name (Last, First, Middle Initial)

Nancy Stalker

Mailing Address emp 16479
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
Vice President, Pharmacy Services

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 31 / 2008

Transaction ID: SA11AI.9123

Amount of Each Receipt this Period

60.00

Payroll contribution per cycle \$30.00

SUBTOTAL of Receipts This Page (optional)

203.06

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 45 / 56
(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)
Robert F. Stephenson

Mailing Address emp 32257
50 Beale Street

City State Zip Code
San Francisco CA 94105

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

Name of Employer Occupation
Blue Shield of California Employee

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: SA11AI.9124

Amount of Each Receipt this Period
20.00

Payroll contribution per cycle \$10.00

B. Full Name (Last, First, Middle Initial)
Susan Stephenson

Mailing Address emp 109942, 50 Beale Street

City State Zip Code
San Francisco CA 94105

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

Name of Employer Occupation
Blue Shield employee

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: SA11AI.9125

Amount of Each Receipt this Period
20.00

Payroll contribution per cycle \$10.00

C. Full Name (Last, First, Middle Initial)
Terrance Stover

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 Occupation
Blue Shield of California employee # 115522

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
585.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: SA11AI.9127

Amount of Each Receipt this Period
45.00

Payroll contribution per cycle \$22.50

SUBTOTAL of Receipts This Page (optional) ► **85.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 56

(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.	Full Name (Last, First, Middle Initial) Kimberly Streit		Date of Receipt																				
	Mailing Address emp 095254 50 Beale Street		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y													
	1	2		3	1		2	0	0	8													
	City State Zip Code San Francisco CA 94105		Transaction ID: SA11AI.9128																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00																					
Name of Employer Occupation Blue Shield of California employee		Payroll contribution per cycle \$25.00																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00																					

B.	Full Name (Last, First, Middle Initial) Malcolm Strohson Jr.		Date of Receipt																				
	Mailing Address 50 Beale Street		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y													
	1	2		3	1		2	0	0	8													
	City State Zip Code San Francisco CA 94105		Transaction ID: SA11AI.9129																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00																					
Name of Employer Occupation Blue Shield of California employee # 115599		Payroll contribution per cycle \$22.50																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 585.00																					

C.	Full Name (Last, First, Middle Initial) Preddis Sullivan		Date of Receipt																				
	Mailing Address emp 115476 50 Beale Street		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y													
	1	2		3	1		2	0	0	8													
	City State Zip Code San Francisco CA 94105		Transaction ID: SA11AI.9130																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00																					
Name of Employer Occupation Blue Shield of California employee		Payroll contribution per cycle \$25.00																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00																					

SUBTOTAL of Receipts This Page (optional)	145.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 56
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Lyle Swallow	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 18612 50 Beale Street	Transaction ID: SA11AI.9131
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$75.00
	Name of Employer Blue Shield of California Occupation Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1565.00	

B.	Full Name (Last, First, Middle Initial) James Taylor	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 112237, 50 Beale Street	Transaction ID: SA11AI.9132
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Blue Shield Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) Eric Terndrup	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 114199 50 Beale St.	Transaction ID: SA11AI.9133
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 56.78
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$28.39
	Name of Employer Blue Shield of California Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 711.99	

SUBTOTAL of Receipts This Page (optional)	226.78
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 48 / 56
	<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.	Full Name (Last, First, Middle Initial) Ryan Thompson	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 114592, 50 Beale Street	Transaction ID: SA11AI.9136
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$15.00
	Name of Employer Blue Shield Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00	

B.	Full Name (Last, First, Middle Initial) Joanne Trenam	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 020511, 50 Beale Street	Transaction ID: SA11AI.9141
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Blue Shield Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) Margaret Trevor	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 115606 50 Beale Street	Transaction ID: SA11AI.9142
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Blue Shield of California Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional)	100.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 49 / 56
(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)
 Robert Veeneman
 Mailing Address 50 Beale Street
 City State Zip Code
 San Francisco CA 94105
 Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 3 1 / 2 0 0 8
Transaction ID: SA11AI.9144
 Amount of Each Receipt this Period
 200.00
 Payroll contribution per cycle \$100.00
 Name of Employer Occupation
 Blue Shield of California employee # 095413
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2416.63
 FEC ID number of contributing federal political committee. **C**

B. Full Name (Last, First, Middle Initial)
 Karen Vigil
 Mailing Address 50 Beale Street
 City State Zip Code
 San Francisco CA 94105
 Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 3 1 / 2 0 0 8
Transaction ID: SA11AI.9146
 Amount of Each Receipt this Period
 100.00
 Payroll contribution per cycle \$50.00
 Name of Employer Occupation
 Blue Shield of California employee
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00
 FEC ID number of contributing federal political committee. **C**

C. Full Name (Last, First, Middle Initial)
 Robert Wadsworth
 Mailing Address emp 18560
 50 Beale Street
 City State Zip Code
 San Francisco CA 94105
 Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 3 1 / 2 0 0 8
Transaction ID: SA11AI.9149
 Amount of Each Receipt this Period
 60.00
 Payroll contribution per cycle \$30.00
 Name of Employer Occupation
 Blue Shield of California Employee
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 780.00
 FEC ID number of contributing federal political committee. **C**

SUBTOTAL of Receipts This Page (optional) ► 360.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 56

(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.	Full Name (Last, First, Middle Initial) Troy Ward		Date of Receipt
	Mailing Address 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Shield of California		Occupation employee # 114007	Transaction ID: SA11AI.9150
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="585.00"/>	Amount of Each Receipt this Period <input type="text" value="45.00"/>
			Payroll contribution per cycle \$22.50

B.	Full Name (Last, First, Middle Initial) Diane Watts		Date of Receipt
	Mailing Address emp 113379, 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Shield		Occupation employee	Transaction ID: SA11AI.9151
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="520.00"/>	Amount of Each Receipt this Period <input type="text" value="40.00"/>
			Payroll contribution per cycle \$20.00

C.	Full Name (Last, First, Middle Initial) Mark Weideman		Date of Receipt
	Mailing Address 114691 50 Beale St		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Shield		Occupation employee	Transaction ID: SA11AI.9152
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1040.00"/>	Amount of Each Receipt this Period <input type="text" value="80.00"/>
			Payroll contribution per cycle \$40.00

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="165.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 56
	<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.	Full Name (Last, First, Middle Initial) Bonnie Wells		Date of Receipt
	Mailing Address emp 113298 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9153
Name of Employer Blue Shield of California		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text"/> 20.00
		Payroll contribution per cycle \$10.00	

B.	Full Name (Last, First, Middle Initial) Noel Whitman		Date of Receipt
	Mailing Address 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9156
Name of Employer Blue Shield to California		Occupation employee # 114963	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 585.00	<input type="text"/> 45.00
		Payroll contribution per cycle \$22.50	

C.	Full Name (Last, First, Middle Initial) Ms Janet D. Widmann		Date of Receipt
	Mailing Address emp 111756 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9157
Name of Employer Blue Shield of California		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 780.00	<input type="text"/> 60.00
		Payroll contribution per cycle \$30.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 125.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 52 / 56
	<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.	Full Name (Last, First, Middle Initial) Ms Fiona M. Wilmot	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 111587 50 Beale Street	Transaction ID: SA11AI.9159
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 39.38
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$19.69
	Name of Employer Occupation Blue Shield of California Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 508.94	

B.	Full Name (Last, First, Middle Initial) Jered Wilson	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 50 Beale Street	Transaction ID: SA11AI.9160
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Occupation Blue Shield of California employee # 115412	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

C.	Full Name (Last, First, Middle Initial) Carol Wise	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 109914 50 Beale Street	Transaction ID: SA11AI.9162
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Occupation Blue Shield of California Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	104.38
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 53 / 56
(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

<p>A. Full Name (Last, First, Middle Initial) Jason Wong</p> <p>Mailing Address emp 112700, 50 Beale Street</p> <p>City State Zip Code San Francisco CA 94105</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Blue Shield Occupation employee</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 260.00</p>	<p>Date of Receipt MM / DD / YYYY 12 / 31 / 2008</p> <p>Transaction ID: SA11AI.9165</p> <p>Amount of Each Receipt this Period 20.00</p> <p>Payroll contribution per cycle \$10.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Amy Yao</p> <p>Mailing Address 50 Beale Street</p> <p>City State Zip Code San Francisco CA 94105</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Blue Shield of California Occupation employee #115363</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 757.50</p>	<p>Date of Receipt MM / DD / YYYY 12 / 31 / 2008</p> <p>Transaction ID: SA11AI.9167</p> <p>Amount of Each Receipt this Period 60.00</p> <p>Payroll contribution per cycle \$30.00</p>
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<p>C. Full Name (Last, First, Middle Initial) John S. Yao</p> <p>Mailing Address 50 Beale Street</p> <p>City State Zip Code San Francisco CA 94105</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Blue Shield of California Occupation employee # 111926</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 292.50</p>	<p>Date of Receipt MM / DD / YYYY 12 / 31 / 2008</p> <p>Transaction ID: SA11AI.9168</p> <p>Amount of Each Receipt this Period 45.00</p> <p>Payroll contribution per cycle \$22.50</p>
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SUBTOTAL of Receipts This Page (optional)	125.00
TOTAL This Period (last page this line number only)	7549.75

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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

A. Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER <hr/> Mailing Address 2801 Turk Blvd., Suite 306 <hr/> City San Francisco State CA Zip Code 94118 <hr/> Purpose of Disbursement 2010 Primary Election Candidate Name FRIENDS OF BARBARA BOXER <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 00 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <hr/> Category/ Type	Transaction ID: SB23.9197 Date of Disbursement 12 / 12 / 2008 <hr/> Amount of Each Disbursement this Period 1000.00
	Full Name (Last, First, Middle Initial) NATHAN DEAL FOR CONGRESS <hr/> Mailing Address PO BOX 16021 <hr/> City Alexandria State VT Zip Code 22301 <hr/> Purpose of Disbursement Stop pay 7/31/07 due to lost check issued 8/23/06 Candidate Name NATHAN DEAL FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 09 <hr/> Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <hr/> Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

0.00

**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)

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<input type="checkbox"/> 21b	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<p>A. Full Name (Last, First, Middle Initial) Bank, Fees</p> <p>Mailing Address 345 Montgomery Street</p> <p>City San Francisco State CA Zip Code 94101</p> <p>Purpose of Disbursement Account Analysis Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.9198</p> <p>Date of Disbursement 12 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 33.28</p>
<p>B. Full Name (Last, First, Middle Initial) Bank, Fees</p> <p>Mailing Address 345 Montgomery Street</p> <p>City San Francisco State CA Zip Code 94101</p> <p>Purpose of Disbursement Account Analysis Fee (8/15/07)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.10046</p> <p>Date of Disbursement 12 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 25.47</p>
<p>C. Full Name (Last, First, Middle Initial) Bank, Fees</p> <p>Mailing Address 345 Montgomery Street</p> <p>City San Francisco State CA Zip Code 94101</p> <p>Purpose of Disbursement Account Analysis Fee (9/17/07)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.10048</p> <p>Date of Disbursement 12 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 0.52</p>

SUBTOTAL of Disbursements This Page (optional) ▶

59.27

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)

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<input type="checkbox"/> 21b	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) Bank, Fees	Transaction ID: SB29.10049 Date of Disbursement 12 / 15 / 2008
	Mailing Address 345 Montgomery Street City San Francisco State CA Zip Code 94101 Purpose of Disbursement Account Analysis Fee (10/15/07) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Amount of Each Disbursement this Period 2.28	
B. Full Name (Last, First, Middle Initial) Bank, Fees	Transaction ID: SB29.10050 Date of Disbursement 12 / 15 / 2008
	Mailing Address 345 Montgomery Street City San Francisco State CA Zip Code 94101 Purpose of Disbursement Account Analysis Fee (12/17/07) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Amount of Each Disbursement this Period 58.12	

SUBTOTAL of Disbursements This Page (optional) ▶

60.40

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

119.67