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PAGE 1 / 16

REPO	DRT	OF	REC	EIP	ΓS
AND	DIS	BUF	RSEN	/EN	٢S

For Other Than An Authorized Committee

						Office Use Only
1.	NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: I over the lir	<sup>f</sup> typing, type es.	12FE4M	5
В	lue Shield of Californ	ia PAC (Shield PA	C)			
	DRESS (number and street) Check if different than previously reported. (ACC)	601 12th Street				94607
2.	FEC IDENTIFICATION N		CITY A	5		
	C C00340364	3	. IS THIS REPORT	NEW (N) <b>OR</b>	(A)	IENDED
4.	TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Reports:	×	Mar 20 (M3)	Jun 20 (M6)		20 (M9) Dec 20 (M12) (Non-Election Year Only)
	April 15 Quarterly Report (0	D1)	Apr 20 (M4)	Jul 20 (M7)		20 (M10) Jan 31 (YE)
	July 15 Quarterly Report (C	(C) 12-Day PRE-Election			General	
	October 15 Quarterly Report (0	Report for the	e: Conver	tion (12C)	Special (	12S)
	January 31 Year-End Report (Y		ection on		Y Y Y Y Y	in the State of
	July 31 Mid-Year Report (Non-electio Year Only) (MY)	POST-Electio		l (30G)	Runoff (3	BOR) Special (30S)
	Termination Report (TER)			/ D D /	Y Y Y Y Y	in the State of
5.	Covering Period 02		23 thro	ugh 02	/ D D / 28	2023
	ertify that I have examined the or Print Name of Treasure	Glidden, Emily, , ,	t of my knowledge	and belief it is tru	e, correct and	d complete.
		len, Emily, , ,	[Electro	nically Filed] D	ate 03	/ D D / Y Y Y Y 20 / 2023
NO		eous, or incomplete inform	ation may subject th	e person signing th	iis Report to th	ne penalties of 52 U.S.C. § 30109.
	Office Use Only					FEC FORM 3X Rev. 05/2016

X

	FEC Form 3X (Rev. 05/2016)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page <b>2</b>
W	Irite or Type Committee Name		
E	Blue Shield of California PAC (Shi	eld PAC)	
R	eport Covering the Period: From:	02 01 / Y Y Y Y Y 02 01 To:	02 / D D / Y Y Y Y 28 2023
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2023		46205.21
	(b) Cash on Hand at Beginning of Reporting Period	27680.64	
	(c) Total Receipts (from Line 19)	13496.24	27550.48
	<ul> <li>(d) Subtotal (add Lines 6(b) and</li> <li>6(c) for Column A and Lines</li> <li>6(a) and 6(c) for Column B)</li> </ul>	41176.88	73755.69
7.	Total Disbursements (from Line 31)	102.24	32681.05
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	41074.64	41074.64
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

#### For further information contact:

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

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

## DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

## Blue Shield of California PAC (Shield PAC)

Report Covering the Period: From:		b: 02 / 28 / 2023
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	2984.00	4384.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	10512.24	23166.48
(iii) TOTAL (add	4	
Lines 11(a)(i) and (ii)	13496.24	27550.48
(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	10100.01	27550.40
Totals to Line 33, page 5)▶	13496.24	27550.48
. Transfers From Affiliated/Other	0.00	0.00
Party Committees	0.00	0.00
. All Loans Received	0.00	0.00
. All Loans Received		
Lean Decomposite Decoived	0.00	0.00
<ul> <li>Loan Repayments Received</li> <li>Offsets To Operating Expenditures</li> </ul>	0.00	
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
. 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 Transfers (add 18(a) and 18(b))	0.00	0.00
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	13496.24	27550.48
. Total Federal Receipts		

20. Total Federal Receipts (subtract Line 18(c) from Line 19).......► 13496.24

27550.48

Page 3

I

## DETAILED SUMMARY PAGE

of Disbursements

	FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 4
	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	perating Expenditures: ) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Tear-IO-Dale
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
(b	, 1 5	102.24	181.05
(c	Expenditures ) Total Operating Expenditures	102.24	
<b>\</b> -	(add 21(a)(i), (a)(ii), and (b))	102.24	181.0
	ansfers to Affiliated/Other Party ommittees	0.00	25000.00
Co Fe	ontributions to ederal Candidates/Committees nd Other Political Committees	0.00	7500.00
(u	dependent Expenditures se Schedule E)	0.00	0.00
Č(	oordinated Party Expenditures 2 U.S.C. § 30116(d)) se Schedule F)	0.00	
<b>\</b> -			0.00
Lo	pan Repayments Made	0.00	0.00
R	pans Made efunds of Contributions To:	0.00	0.00
(a	) Individuals/Persons Other Than Political Committees	0.00	0.00
(b	· · · · · · · · · · ·	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
	ther Disbursements (Including		
	on-Federal Donations)	0.00	0.00
F∉ (a	ederal Election Activity (52 U.S.C. § 30101 ) Allocated Federal Election Activity (from Schedule H6)	(20))	
	(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
	tal Disbursements (add Lines 21(c), 22, 3, 24, 25, 26, 27, 28(d), 29 and 30(c)).	102.24	32681.05
Тс	otal Federal Disbursements		47. 47. 47.
(s	ubtract Line 21(a)(ii) and Line 30(a)(ii)		
fro	om Line 31)	102.24	32681.05

### DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

**Total This Period** 

FFC	Form	3X	(Rev	05/2016	)
1 20	1 01111	57	(110 v.	05/2010	,

#### III. Net Contributions/ Operating Expenditures

33.	Total Contributions (other than loans)
	(from Line 11(d), page 3)
34.	Total Contribution Refunds
	(from Line 28(d))
35.	Net Contributions (other than loans)
	(subtract Line 34 from Line 33)
36.	Total Federal Operating Expenditures
	(add Line 21(a)(i) and Line 21(b))
37.	Offsets to Operating Expenditures
	(from Line 15, page 3)
38.	Net Operating Expenditures

(subtract Line 37 from Line 36) .....

					13496.24
	7			-7	
					0.00
	-7		1	- 7	49.
1.					13496.24
	-7			- 7	
1.1					102.24
	-7			- 7	
1.1					0.00
	-7			7	
1.1					102.24
	-7-	1		_7_	

						27550.48
		-7			-7	27330.40
						0.00
	÷	-	÷	÷	-	
	_	-			-	27550.48
	÷		÷	÷	- 7	
		-			-	181.05
		-7			-7	0.00
			1			181.05
1		-7-				101.00

COLUMN B

Calendar Year-to-Date

#### Page 5

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

Use separate schedule(s)	FOR LINE NUMBER: (check only one)					
for each category of the Detailed Summary Page	🗶 11a 🗌 11b					

		Detailed Summary Page	×	11a		111		11c	12	· -			
Any information copied from such Reports							e of s						
or for commercial purposes, other than us	sing the name and a	ddress of any political committe	e to sol	icit coi	ntrib	outic	ons fro	om such	1 committe	ее.			
NAME OF COMMITTEE (In Full) Blue Shield of California P.	AC (Shield PA	C)											
Full Name of Individual (Last, First, Mi <b>A.</b> Arjoyan, Aliza, , ,	ddle Initial) or Full O	rganization Name		Date of Receipt									
Mailing Address 601 12th Street				02 01 2023									
City	State	Zip Code		Trans	acti	ion	ID : I	A25081					
Oakland	CA	94607	A	mount	t of	Ead	ch Re	ceipt th	nis Period				
FEC ID number of contributing federal political committee.	C					-			70.0	00			
Name of Employer (for Individual) Blue Shield of California		upation (for Individual) ior Vice President		M	emo	o Ite	em						
Receipt For:	Aggregate	Year-to-Date V											
Primary General Other (specify) ▼		280.00	1										
Full Name of Individual (Last, First, Mi B. Barnes, Tracy, , ,	ddle Initial) or Full O	rganization Name		Date of	Re	ecei	pt						
Mailing Address 601 12th Street				<sup>M</sup> 02	1		01	/ Y	y y 2023	Y			
City	State	Zip Code		Trans	acti	ion	ID : I/	A25092					
Oakland	CA	94607	A	mount	t of	Ead	ch Re	eceipt th	nis Period				
FEC ID number of contributing federal political committee.	C			50.00						00			
Name of Employer (for Individual) BLUE SHIELD OF CALIFORNIA		upation (for Individual) ECTOR		Memo Item									
Receipt For:	Aggregate	Year-to-Date 🔻											
Other (specify) ▼		, 200.00	]										
Full Name of Individual (Last, First, Mi C. Bergman, Patrice, , ,	ddle Initial) or Full O	rganization Name		Date of	- Ro	coi	nt						
Mailing Address 601 12th Street				02			01	/ Y	2023	Y			
City	State	Zip Code		Trans	act	ion	ID : I	A25101					
Oakland	CA	94607	A	mount	t of	Ead	ch Re	ceipt th	nis Period				
FEC ID number of contributing federal political committee.	C					y		,	100.0	00			
Name of Employer (for Individual) BLUE SHIELD OF CA	Occi VP	Occupation (for Individual) VP					Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General	55 - 5		11										
Other (specify)		400.00											
SUBTOTAL of Receipts This Page (option	onal)					,		.,	220.0	00			
TOTAL This Period (last page this line n	umber only)		•			-							

PAGE 6 OF

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

PAGE

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		Detailed Summary Page	×	11a		11b	11c		12	
				13		14	15		16	17
Any information copied from such Repo or for commercial purposes, other than										
NAME OF COMMITTEE (In Full)										
Blue Shield of California	PAC (Shield PA	C)								
Full Name of Individual (Last, First, A. Chasin, Andrew, , ,	Middle Initial) or Full O	rganization Name	[	Date of	f R	eceipt				
Mailing Address 601 12th Street				м м 02	1	01	D / Y	Y 20	)23	Y
City	State	Zip Code		Trans	sac	tion ID :	IA25129			
Oakland	CA	94607	A	Amount	t of	Each F	Receipt th	is P	eriod	
FEC ID number of contributing federal political committee.	C							_	200.0	
Name of Employer (for Individual)	Occ	upation (for Individual)		M	em	o Item				
BLUE SHIELD OF CALIFORNIA		ECTOR								
Receipt For:		Year-to-Date ▼								
Primary General	1.99.09410		11.							
Other (specify) <b>v</b>		800.00								
Full Name of Individual (Last, First, B. Clarke, Sandra, , ,	Middle Initial) or Full O	rganization Name	[	Date of	fR	eceipt				
Mailing Address 601 12th Street				м м 02	1	01		202	23 23	Y
City	State	Zip Code		Trans	act	tion ID :	IA25136			
Oakland	CA	94607	A	Amount	t of	FEach F	Receipt th	nis Po	eriod	
FEC ID number of contributing federal political committee.	C						-	_	70.0	00
Name of Employer (for Individual) Blue Shield of California		upation (for Individual) ef Financial Officer		М	em	o Item				
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General	7.991094.0		11							
Other (specify) ▼		280.00	4							
Full Name of Individual (Last, First, C. Davis, Lisa, , ,	Middle Initial) or Full O	rganization Name		Date of	fR	eceipt				
Mailing Address 601 12th Street				м м 02	1	01			23	Y
City	State	Zip Code		Trans	sac	tion ID	IA25152			
Oakland	CA	94607	A	Amoun	t of	Each F	Receipt th	nis P	eriod	
FEC ID number of contributing federal political committee.						, .	.,	_	70.0	0
Name of Employer (for Individual)Occupation (for Individual)Blue Shield of CaliforniaSenior Vice President				M	lem	o Item				
Receipt For: Primary General Other (specify)	Primary General General									
SUBTOTAL of Receipts This Page (or	tional)					y .	. ,	_	340.0	0

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

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s)	FOR LINE NUMBER: (check only one)							
for each category of the Detailed Summary Page	<b>X</b> 11a 11b							

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	y information copied from such Reports and St for commercial purposes, other than using the									
$\left  \right\rangle$	NAME OF COMMITTEE (In Full)									
$\square$	Blue Shield of California PAC (S	hield PA	AC)							
	Full Name of Individual (Last, First, Middle Initi	al) or Full C	Organization Name							
Α.	Fleischman, Susan, , ,			[	Date of	Red	ceipt			
	Mailing Address 601 12th Street				M M 02	/	01	/ Y	y y 2023	Y
	City	State	Zip Code	- 1		acti		IA25168	2025	
	Oakland	CA	94607					eceipt thi	e Poriod	
	FFC ID number of contributing			_ ′	Amount			eceipt till	SFEIIUU	
	FEC ID number of contributing federal political committee.	C			_		7	7	70.	
	Name of Employer (for Individual)	Occ	cupation (for Individual)		Me	emo	Item			
	Blue Shield of California	Chi	ef Medical Officer							
	Receipt For:	Aggregate	Year-to-Date V							
	Primary General									
	Other (specify) <b>v</b>	L	280.00							
В.	Full Name of Individual (Last, First, Middle Initi Kibler, Tina, , ,	al) or Full C	Drganization Name	[	Date of	Red	ceipt			
	Mailing Address 601 12th Street				M M	/	D D	/ Y	Y Y	Y
	5 11 11 00 12 11 01 00 1				02	Ľ	01		2023	
	City	State	Zip Code		Trans	actio	on ID : I	IA25227		
	Oakland	CA	94607	/	Amount	t of I	Each R	eceipt thi	s Period	
	FEC ID number of contributing federal political committee.	С					,		67.	00
	Name of Employer (for Individual) BLUE SHIELD OF CALIFORNIA	Occ	cupation (for Individual)		Me	emo	Item			
	Receipt For:	Year-to-Date V	_							
	Primary General	Aggregate								
	Other (specify) ▼	L	268.00							
С.	Full Name of Individual (Last, First, Middle Initi Kiefer, Andrew, , ,	al) or Full C	Drganization Name		Date of	Red	ceipt			
	Mailing Address 601 12th Street				M M 02	1	D D D 01	/ Y	y y 2023	Y
	City	State	Zip Code		Trans	acti	on ID :	IA25228		
	Oakland	CA	94607	A	Amount	t of I	Each R	eceipt thi	s Period	
	FEC ID number of contributing federal political committee.	С			_				200.	00
						-	7			
	Name of Employer (for Individual) BLUE SHIELD OF CA	cupation (for Individual) ECTOR		M	emo	Item				
	Receipt For:	Agareaate	Year-to-Date V							
	Primary General	55-55-10	800.00							
	Other (specify)									
s	UBTOTAL of Receipts This Page (optional)		••••••				,	,	337.	00

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

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PAGE 8 OF

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

PAGE

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			Detailed Summary Page		<b>4</b> 11a	Ц	11b	11c		12	<u> </u>
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	for commercial purposes, other than using the										
$\left  \right $	NAME OF COMMITTEE (In Full)										
	Blue Shield of California PAC (S	Shield PA	(C)								
Α.	Full Name of Individual (Last, First, Middle Ini Lautsch, Kenneth, , ,	tial) or Full C	organization Name		Date of	f Red	ceipt				
	Mailing Address 601 12th Street				02	/	01	/ Y	Y 20	023	Y
	City	State	Zip Code		Trans	sactio	on ID :	IA25243			
	Oakland	CA	94607		Amoun	t of E	Each R	eceipt thi	is F	'eriod	
	FEC ID number of contributing federal political committee.	С					<u>, , , , , , , , , , , , , , , , , , , </u>	-		50.0	00
	Name of Employer (for Individual) BLUE SHIELD OF CA	Occ VP	upation (for Individual)		М	emo	Item				
	Receipt For:	Aggregate	Year-to-Date V								
	Primary General	00 0									
	Other (specify) <b>v</b>	L	200.00								
_	Full Name of Individual (Last, First, Middle Ini	tial) or Full C	organization Name			. –					
в.	Lieb, Timothy, , ,				Date of	_		_			
	Mailing Address 601 12th Street	01-1-	Zie Ooste		02	1	01	/ Y	20	)23	Y
	City Oakland	State CA	Zip Code 94607					IA25250			
			94007		Amoun	tote	Each R	eceipt thi	is F	'eriod	
	FEC ID number of contributing federal political committee.	С			70.00						
	Name of Employer (for Individual) Blue Shield of California		upation (for Individual) nior Vice President, Commercial	Маг	М	emo	Item				
	Receipt For:	Aggregate	Year-to-Date V								
	Primary General										
	Other (specify) <b>v</b>		, 280.00								
с.	Full Name of Individual (Last, First, Middle Ini Markovich, Paul, , ,	tial) or Full C	organization Name		Date of	f Red	ceipt				
	Mailing Address 601 12th Street				02	/	D D D 01	/ Y		)23 <sup>°</sup>	Y
	City	State	Zip Code		Trans	saction	on ID :	IA25262			
	Oakland	CA	94607		Amoun	t of E	Each R	eceipt thi	is F	'eriod	
	FEC ID number of contributing federal political committee.	C					, .	· ·	_	200.0	)0
	Name of Employer (for Individual) BLUE SHIELD OF CALIFORNIA	Occupation (for Individual) PRESIDENT			M	emo	Item				
	Receipt For:	Aggregate Year-to-Date ▼									
	Primary     General       Other (specify)     800.00										
<u> </u>									-	320.0	
s	UBTOTAL of Receipts This Page (optional)				<u> </u>	-	,	9		520.0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

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			Detailed Summary Page		11a 13		11b		11c 15		12 16		17
	ny information copied from such Reports and for commercial purposes, other than using t			for the		rpose		olicitin		ntribut		1	
	NAME OF COMMITTEE (In Full) Blue Shield of California PAC	(Shield PA	.C)										
Α.	Full Name of Individual (Last, First, Middle O'Hara, Mary, , , Mailing Address 601 12th Street	rganization Name		Date		eceipt		/ Y	Y	Ŷ	Y		
	City	State	Zip Code		02		(	01	A25290	2	023		
	Oakland	CA	94607		Amou	nt o	f Each	n Re	ceipt th	nis F	'eriod		
	FEC ID number of contributing federal political committee.	С			Ē		-ge				70.0	00	
	Name of Employer (for Individual) BLUE SHIELD OF CA	Occi SVF	upation (for Individual) S		N	Nem	io Item	n					
	Receipt For: Primary General Other (specify) ▼	]											
в.	Full Name of Individual (Last, First, Middle Phillips Husband, Vivian, , ,	Initial) or Full O	rganization Name		Date	of R	leceipt						
	Mailing Address 601 12th Street				<sup>™</sup> 02	VI		D 01	/ Y		)23	Y	
	City	State	Zip Code		Tran	sac	tion ID	) : I/	A25302			_	
	Oakland	CA	94607		Amou	nt o	f Each	n Re	eceipt th	nis F	'eriod		
	FEC ID number of contributing federal political committee.	С			<u> </u>		-9-		-		70.0	)0	
	Name of Employer (for Individual) Blue Shield of California		upation (for Individual) e President of Customer Experier	ICE	N	Nem	io Item	n					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00											
— с.	Full Name of Individual (Last, First, Middle Spector, Robert, , ,	Initial) or Full O	rganization Name		Date	of R	eceipt						
	Mailing Address 601 12th Street				M 02			D 01	/ Y		)23 )	Y	
	City Oakland	State CA	Zip Code 94607	_					A25337		eriod	_	
	FEC ID number of contributing federal political committee.	С			<u> </u>		y				85.0	00	
	Name of Employer (for Individual)Occupation (for Individual)BLUE SHIELDDIRECTOR				1	Merr	no Item	n					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 340.00	]									
5	UBTOTAL of Receipts This Page (optional).			<u> </u>							225.0	)0	٦

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FEC Schedule A (Form 3X) Rev. 06/2016

# SCHEDULE A (FEC Form 3X)

Use separate schedule(s)	FOR LINE NUMBER: (check only one)
for each category of the Detailed Summary Page	🗡 11a 🗌 11b 🗍
Detailed Summary Lage	

ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)									
		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17									
			person for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) Blue Shield of California F	PAC (Shield PA	.C)										
Full Name of Individual (Last, First, M Wilkins, Kimball, , ,	<i>l</i> iddle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 601 12th Street			02 01 / Y Y Y Y 02 01 2023									
City Oakland	State CA	Zip Code 94607	Transaction ID : IA25376 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		50.00									
Name of Employer (for Individual) BLUE SHIELD OF CA		upation (for Individual) ECTOR	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 200.00	]									
Full Name of Individual (Last, First, N 3. Arjoyan, Aliza, , ,	Aiddle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 601 12th Street			02 15 2023									
City Oakland	State CA	Zip Code 94607	Transaction ID : IA25400 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		70.00									
Name of Employer (for Individual) Blue Shield of California		upation (for Individual) nior Vice President	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 280.00	]									
Full Name of Individual (Last, First, M C. Barnes, Tracy, , ,	l Iiddle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 601 12th Street			02 15 / Y Y Y Y 02 15 2023									
City Oakland	State CA	Zip Code 94607	Transaction ID : IA25411 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		50.00									
Name of Employer (for Individual) BLUE SHIELD OF CALIFORNIA		upation (for Individual) ECTOR	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date  200.00	]									
SUBTOTAL of Receipts This Page (op	l tional)		170.00									
TOTAL This Period (last page this line	number only)											

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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	y information copied from such Reports and Stateme for commercial purposes, other than using the name							se of s								
	NAME OF COMMITTEE (In Full) Blue Shield of California PAC (Shield			5 10 501								,				
<u>/</u> ۹.	Full Name of Individual (Last, First, Middle Initial) or Bergman, Patrice, , ,	ganization Name	Date of Receipt													
	Mailing Address 601 12th Street				02 15 2023											
	City Sta Oakland CA		Zip Code 94607	Transaction ID : IA25419 Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.						-				100.0	0				
	Name of Employer (for Individual) BLUE SHIELD OF CA	Occup VP	pation (for Individual)		Memo Item											
	Receipt For:     Aggr       Primary     General       Other (specify) ▼	regate Y	′ear-to-Date ▼ 400.00	1												
3.	Full Name of Individual (Last, First, Middle Initial) or Chasin, Andrew, , ,	Full Org	ganization Name		Date of	Re	ece	ipt								
	Mailing Address 601 12th Street				02 / D D / Y Y Y Y 2023											
	City Sta Oakland C/		Zip Code 94607		Trans:		-				Period					
	FEC ID number of contributing federal political committee.						-				200.0	0				
	Name of Employer (for Individual) BLUE SHIELD OF CALIFORNIA		pation (for Individual) CTOR		Memo Item											
	Receipt For:     Aggr       Primary     General       Other (specify) ▼	regate Y	′ear-to-Date ▼ 800.00	1												
	Full Name of Individual (Last, First, Middle Initial) or Clarke, Sandra, , ,	Full Org	ganization Name		Date of	Re	ece	ipt								
	Mailing Address 601 12th Street				м м 02	/	Γ	D D 15	/ Y		023	Y				
	City Sta Oakland Cr		Zip Code 94607	A	Trans				A25454 ceipt t		Period					
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	Name of Employer (for Individual) Blue Shield of California		pation (for Individual) Financial Officer		Me	emc	o It	em								
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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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	y information copied from such Reports and Stater for commercial purposes, other than using the nar					or the		ро	ose of s	oliciti		ontributi	ons					
	NAME OF COMMITTEE (In Full) Blue Shield of California PAC (Shie	eld PA	AC)	)														
A.	Full Name of Individual (Last, First, Middle Initial) Davis, Lisa, , ,	nization Name	Date of Receipt															
	Mailing Address 601 12th Street		02 / 15 / 2023															
	City Oakland	State CA		Zip Code 94607	Transaction ID : IA25470         Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	C				70.00												
	Name of Employer (for Individual) Blue Shield of California		•	tion (for Individual) Vice President		Memo Item												
	Receipt For:     At       Primary     General       Other (specify) ▼	Yea	ar-to-Date ▼ 280.00	1														
В.	Full Name of Individual (Last, First, Middle Initial) Fleischman, Susan, , ,	or Full O	Drga	nization Name		Date of	f Re	ece	eipt									
	Mailing Address 601 12th Street		02 / D D / Y Y Y Y 02 15 2023															
	City Oakland	State CA		Zip Code 94607	Transaction ID : IA25486 Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	C						-,		-1	_	70.0	0					
	Name of Employer (for Individual) Blue Shield of California		•	tion (for Individual) Aedical Officer		Memo Item												
	Receipt For:     A       Primary     General       Other (specify) ▼	ggregate	Yea	ar-to-Date ▼ 280.00	1													
C.	Full Name of Individual (Last, First, Middle Initial) Kibler, Tina, , ,	or Full O	Drga	nization Name		Date of	f Re	ece	eipt									
	Mailing Address 601 12th Street					<sup>M</sup> 02	Ŀ.		D D D 15	1	2	2023	Y					
	City Oakland	State CA		Zip Code 94607	A				ach Re			Period						
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	BLUE SHIELD OF CALIFORNIA VI			tion (for Individual)		M	emc	o I	ltem									
	Receipt For:     At       Primary     General       Other (specify)	ggregate	Yea	ar-to-Date ▼ 268.00	1													
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SCHEDULE A	(FEC	Form	3X)
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	y information copied from such Reports and St for commercial purposes, other than using the																
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$\langle \rangle$	Blue Shield of California PAC (S	Shield PA	AC)														
Α.	Full Name of Individual (Last, First, Middle Init Kiefer, Andrew, , ,	Date of Receipt															
	Mailing Address 601 12th Street					02 15 2023											
	City	State	Z	Zip Code	Transaction ID : IA25545 Amount of Each Receipt this Period												
	Oakland	CA		94607													
	FEC ID number of contributing federal political committee.	С			200.00												
	Name of Employer (for Individual)	Occ	upatio	n (for Individual)	Memo Item												
	BLUE SHIELD OF CA		RECTO			-											
	Receipt For:	Aggregate	Year-	to-Date ▼													
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	Other (specify) <b>v</b>		- <b>J</b> -	800.00													
в.	Full Name of Individual (Last, First, Middle Init Lautsch, Kenneth, , ,	ial) or Full O	Organiz	zation Name		Date of	R	eceipt									
	Mailing Address 601 12th Street		02 15 2023														
	City	State	Z	Zip Code		Transaction ID : IA25560											
	Oakland	CA		94607		Amount of Each Receipt this Period											
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	Name of Employer (for Individual) BLUE SHIELD OF CA	Occ VP	•	n (for Individual)		M	em	o Item									
	Receipt For:	Aggregate	Year-	to-Date ▼													
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с.	Full Name of Individual (Last, First, Middle Init Lieb, Timothy, , ,	ial) or Full O	Organiz	zation Name		Date of	R	eceipt									
	Mailing Address 601 12th Street		02 15 2023														
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	Oakland	CA		94607		Amount	t of	f Each R	leceipt th	is F	'eriod						
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	Name of Employer (for Individual) Blue Shield of California	Occupation (for Individual) Senior Vice President, Commercial Marł					em	io Item									
	Receipt For: Primary General	Aggregate	Year-	to-Date V													
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s	UBTOTAL of Receipts This Page (optional)			•			I	, .	. ,		320.0	)0					

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ITEIWILLED RECEIPIO		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17										
			person for the purpose of soliciting contributions be to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) Blue Shield of California PAC	C (Shield PA	C)											
Full Name of Individual (Last, First, Middl Markovich, Paul, , ,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 601 12th Street			02 / D D / Y Y Y Y 02 15 2023										
City Oakland	State CA	Zip Code 94607	Transaction ID : IA25579 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		200.00										
Name of Employer (for Individual) BLUE SHIELD OF CALIFORNIA		upation (for Individual) SIDENT	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 800.00											
Full Name of Individual (Last, First, Middl O'Hara, Mary, , , Mailing Address 601 12th Street	e Initial) or Full O	rganization Name	Date of Receipt										
City	State	Zip Code	02 15 2023										
Oakland	CA	94607	Transaction ID : IA25607 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		70.00										
Name of Employer (for Individual) BLUE SHIELD OF CA	Occu SVF	upation (for Individual)	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 280.00											
Full Name of Individual (Last, First, Middl Phillips Husband, Vivian, , ,	e Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 601 12th Street			02 / D D / Y Y Y Y 02 15 2023										
City Oakland	State CA	Zip Code 94607	Transaction ID : IA25618 Amount of Each Receipt this Period										
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Name of Employer (for Individual) Blue Shield of California		upation (for Individual) President of Customer Experier	nce Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 280.00											
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SCHEDULE A	(FEC Form 3X)
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			y not be sold or used by any p ddress of any political committe		for the		pose of	f soliciting	g con	ntributi	ions				
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B. Wilkins, Kim Mailing Address		e Initial) or Full O	rganization Name		Date of Receipt 02 15 2023										
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