

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 Cross and Blue Shield of North Carolina Employee Political Action Committee

ADDRESS (number and street) P.O. Box 2291 Durham NC 27702 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00312223 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special Election on 11 04 2008 in the State of

5. Covering Period 10 16 2008 through 11 24 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 Kenneth Wright

Signature of Treasurer Electronically Filed by Kenneth Wright Date 11 25 2008

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 FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

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; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		70275.08
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	3095.82									
(c) Total Receipts (from Line 19) .....	15030.22	117932.55								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	18126.04	188207.63								
7. Total Disbursements (from Line 31) .....	8020.00	178101.59								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	10106.04	10106.04								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

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	13660.98	94521.35
(i) Itemized (use Schedule A) .....	1369.24	23411.20
(ii) Unitemized .....	15030.22	117932.55
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	15030.22	117932.55
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)) .....	15030.22	117932.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	15030.22	117932.55

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	20.00	125.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	20.00	125.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	30000.00
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	226.00
(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	226.00
29. Other Disbursements.....	5500.00	147750.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	8020.00	178101.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8020.00	178101.59

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	15030.22	117932.55
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	226.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15030.22	117706.55
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	20.00	125.59
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	20.00	125.59

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 92
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
H Jorgenia Abernathy

Mailing Address 108 Hoteling Ct

City State Zip Code  
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
880.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 8

**Transaction ID:** SA11AI.70363

Amount of Each Receipt this Period  
40.00

**B.** Full Name (Last, First, Middle Initial)  
H Jorgenia Abernathy

Mailing Address 108 Hoteling Ct

City State Zip Code  
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
920.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 6 / 2 0 0 8

**Transaction ID:** SA11AI.70542

Amount of Each Receipt this Period  
40.00

**C.** Full Name (Last, First, Middle Initial)  
H Jorgenia Abernathy

Mailing Address 108 Hoteling Ct

City State Zip Code  
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
960.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 6 / 2 0 0 8

**Transaction ID:** SA11AI.70720

Amount of Each Receipt this Period  
40.00

**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 7 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Frances Adams	Date of Receipt
	Mailing Address 1 Chatham Lane	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 4 / 2 0 0 8
	City State Zip Code Chapel Hill NC 27514	<b>Transaction ID:</b> SA11AI.70365
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 10.00
	Name of Employer BCBSNC Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 220.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Frances Adams	Date of Receipt
	Mailing Address 1 Chatham Lane	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 6 / 2 0 0 8
	City State Zip Code Chapel Hill NC 27514	<b>Transaction ID:</b> SA11AI.70544
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 10.00
	Name of Employer BCBSNC Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 230.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Frances Adams	Date of Receipt
	Mailing Address 1 Chatham Lane	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 6 / 2 0 0 8
	City State Zip Code Chapel Hill NC 27514	<b>Transaction ID:</b> SA11AI.70722
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 10.00
	Name of Employer BCBSNC Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 30.00
<b>TOTAL</b> 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 8 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bradley Adcock	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 106 Lindenthal Court	<b>Transaction ID:</b> SA11AI.70366
	City Cary State NC Zip Code 27513	Amount of Each Receipt this Period 103.25
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer BCBSNC Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2254.05	

<b>B.</b>	Full Name (Last, First, Middle Initial) Bradley Adcock	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 106 Lindenthal Court	<b>Transaction ID:</b> SA11AI.70545
	City Cary State NC Zip Code 27513	Amount of Each Receipt this Period 103.25
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer BCBSNC Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2357.30	

<b>C.</b>	Full Name (Last, First, Middle Initial) Bradley Adcock	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 106 Lindenthal Court	<b>Transaction ID:</b> SA11AI.70723
	City Cary State NC Zip Code 27513	Amount of Each Receipt this Period 103.25
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer BCBSNC Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2460.55	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>309.75</b>
<b>TOTAL</b> 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 9 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) William Alberti	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 5347 Yardley Terrace	<b>Transaction ID:</b> SA11AI.70367
	City State Zip Code Durham NC 27707	Amount of Each Receipt this Period 25.61
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Assoc. General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 557.32	

<b>B.</b>	Full Name (Last, First, Middle Initial) William Alberti	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 5347 Yardley Terrace	<b>Transaction ID:</b> SA11AI.70546
	City State Zip Code Durham NC 27707	Amount of Each Receipt this Period 25.61
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Assoc. General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 582.93	

<b>C.</b>	Full Name (Last, First, Middle Initial) William Alberti	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 5347 Yardley Terrace	<b>Transaction ID:</b> SA11AI.70724
	City State Zip Code Durham NC 27707	Amount of Each Receipt this Period 25.61
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Assoc. General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 608.54	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	76.83
<b>TOTAL</b> 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 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) John Armentrout		Date of Receipt	
	Mailing Address 108 Woodleaf Dr		M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70369
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		10.00	
Name of Employer BCBSNC		Occupation Project Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) John Armentrout		Date of Receipt	
	Mailing Address 108 Woodleaf Dr		M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70548
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		10.00	
Name of Employer BCBSNC		Occupation Project Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) John Armentrout		Date of Receipt	
	Mailing Address 108 Woodleaf Dr		M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70726
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		10.00	
Name of Employer BCBSNC		Occupation Project Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	30.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Daniel Atherton		Date of Receipt
	Mailing Address 8800 Hatton Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Charlotte	NC	28277
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70370
Name of Employer BCBSNC		Occupation Regional Sales Director	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 ▼ 550.00	<input type="text"/> 25.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Daniel Atherton		Date of Receipt
	Mailing Address 8800 Hatton Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Charlotte	NC	28277
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70549
Name of Employer BCBSNC		Occupation Regional Sales Director	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 ▼ 575.00	<input type="text"/> 25.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Daniel Atherton		Date of Receipt
	Mailing Address 8800 Hatton Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Charlotte	NC	28277
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70727
Name of Employer BCBSNC		Occupation Regional Sales Director	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 ▼ 600.00	<input type="text"/> 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 75.00
<b>TOTAL</b> 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 12 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) J. Joseph Bauers		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 8		
	Mailing Address 203 Woodleaf Dr.		<b>Transaction ID:</b> SA11AI.70374		
	City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 330.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) J. Joseph Bauers		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 8		
	Mailing Address 203 Woodleaf Dr.		<b>Transaction ID:</b> SA11AI.70553		
	City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 345.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) J. Joseph Bauers		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 8		
	Mailing Address 203 Woodleaf Dr.		<b>Transaction ID:</b> SA11AI.70731		
	City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	45.00
<b>TOTAL</b> 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 / 92
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Tracy Bennett		Date of Receipt
	Mailing Address 208 Linville Springs Rd.		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Kernersville	NC	27248
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation Director	<b>Transaction ID:</b> SA11AI.70375
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="220.00"/>	<input type="text" value="10.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Tracy Bennett		Date of Receipt
	Mailing Address 208 Linville Springs Rd.		<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Kernersville	NC	27248
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation Director	<b>Transaction ID:</b> SA11AI.70554
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="230.00"/>	<input type="text" value="10.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Tracy Bennett		Date of Receipt
	Mailing Address 208 Linville Springs Rd.		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Kernersville	NC	27248
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BCBSNC		Occupation Director	<b>Transaction ID:</b> SA11AI.70732
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="240.00"/>	<input type="text" value="10.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="30.00"/>
<b>TOTAL</b> 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 14 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Gary Bolt	Date of Receipt
	Mailing Address 4801 Highgate Drive	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 4 / 2 0 0 8
	City State Zip Code Durham NC 27713	<b>Transaction ID:</b> SA11AI.70377
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 59.00
	Name of Employer BCBSNC Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 1271.35	

<b>B.</b>	Full Name (Last, First, Middle Initial) Gary Bolt	Date of Receipt
	Mailing Address 4801 Highgate Drive	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 6 / 2 0 0 8
	City State Zip Code Durham NC 27713	<b>Transaction ID:</b> SA11AI.70556
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 59.00
	Name of Employer BCBSNC Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 1330.35	

<b>C.</b>	Full Name (Last, First, Middle Initial) Gary Bolt	Date of Receipt
	Mailing Address 4801 Highgate Drive	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 2 1 / 2 0 0 8
	City State Zip Code Durham NC 27713	<b>Transaction ID:</b> SA11AI.70734
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 59.00
	Name of Employer BCBSNC Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 1389.35	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 177.00
<b>TOTAL</b> 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 15 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) H Lewis Borman	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 104 Ironwoods Drive	<b>Transaction ID:</b> SA11AI.70378
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 15.33
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer BCBSNC	Occupation Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.01	

<b>B.</b>	Full Name (Last, First, Middle Initial) H Lewis Borman	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 104 Ironwoods Drive	<b>Transaction ID:</b> SA11AI.70557
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 15.33
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer BCBSNC	Occupation Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.34	

<b>C.</b>	Full Name (Last, First, Middle Initial) H Lewis Borman	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 104 Ironwoods Drive	<b>Transaction ID:</b> SA11AI.70735
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 15.33
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer BCBSNC	Occupation Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.67	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	45.99
<b>TOTAL</b> 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 16 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) W Don Bradley	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 15 Altmont Ct	<b>Transaction ID:</b> SA11AI.70379
	City State Zip Code Durham NC 27705	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2750.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) W Don Bradley	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 15 Altmont Ct	<b>Transaction ID:</b> SA11AI.70558
	City State Zip Code Durham NC 27705	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2875.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) W Don Bradley	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 15 Altmont Ct	<b>Transaction ID:</b> SA11AI.70736
	City State Zip Code Durham NC 27705	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>375.00</b>
<b>TOTAL</b> 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 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Cynthia Brenneman		Date of Receipt	
	Mailing Address 14 Steepleton Court		M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70380
	Hillsborough	NC	27278	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		58.93	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1285.11		

<b>B.</b>	Full Name (Last, First, Middle Initial) Cynthia Brenneman		Date of Receipt	
	Mailing Address 14 Steepleton Court		M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70559
	Hillsborough	NC	27278	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		58.93	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1344.04		

<b>C.</b>	Full Name (Last, First, Middle Initial) Cynthia Brenneman		Date of Receipt	
	Mailing Address 14 Steepleton Court		M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70737
	Hillsborough	NC	27278	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		58.93	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1402.97		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	176.79
<b>TOTAL</b> 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 / 92  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
L Wade Brown

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation Producer Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

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

**Transaction ID:** SA11AI.70739

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City State Zip Code  
Raleigh NC 27613

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

Name of Employer BCBSNC Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1151.40

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 8

**Transaction ID:** SA11AI.70384

Amount of Each Receipt this Period  
85.14

**C.**

Full Name (Last, First, Middle Initial)  
Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City State Zip Code  
Raleigh NC 27613

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

Name of Employer BCBSNC Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1236.54

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 8

**Transaction ID:** SA11AI.70563

Amount of Each Receipt this Period  
85.14

**SUBTOTAL** of Receipts This Page (optional) ..... ► **195.28**

**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 / 92						
	(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

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Milo Brunick		Date of Receipt MM / DD / YYYY 11 / 21 / 2008		
	Mailing Address 4020 Grayson Ridge Court		<b>Transaction ID:</b> SA11AI.70740		
	City Raleigh	State NC	Zip Code 27613	Amount of Each Receipt this Period 85.14	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1321.68		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) L Lisa Cade		Date of Receipt MM / DD / YYYY 10 / 24 / 2008		
	Mailing Address 104 Ackworth Court		<b>Transaction ID:</b> SA11AI.70387		
	City Cary	State NC	Zip Code 27519	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1100.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) L Lisa Cade		Date of Receipt MM / DD / YYYY 11 / 06 / 2008		
	Mailing Address 104 Ackworth Court		<b>Transaction ID:</b> SA11AI.70566		
	City Cary	State NC	Zip Code 27519	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1150.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	185.14
<b>TOTAL</b> 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 20 / 92

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

L Lisa Cade

Mailing Address 104 Ackworth Court

City State Zip Code  
Cary NC 27519

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

Name of Employer Occupation  
BCBSNC VP

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt

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

Transaction ID: SA11AI.70743

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Michele Cash

Mailing Address 8094 Grassy Creek Road

City State Zip Code  
Oxford NC 27565

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

Name of Employer Occupation  
BCBSNC Senior Compensation Advisor

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 571.52

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.70390

Amount of Each Receipt this Period

26.21

**C.**

Full Name (Last, First, Middle Initial)

Michele Cash

Mailing Address 8094 Grassy Creek Road

City State Zip Code  
Oxford NC 27565

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

Name of Employer Occupation  
BCBSNC Senior Compensation Advisor

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 597.73

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.70569

Amount of Each Receipt this Period

26.21

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

102.42

**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 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Michele Cash	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 8094 Grassy Creek Road	<b>Transaction ID:</b> SA11AI.70746
	City State Zip Code Oxford NC 27565	Amount of Each Receipt this Period 26.21
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Senior Compensation Advisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 623.94	

<b>B.</b>	Full Name (Last, First, Middle Initial) Steven Cherrier	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 1207 Holly Creek Lane	<b>Transaction ID:</b> SA11AI.70391
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 440.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Steven Cherrier	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 1207 Holly Creek Lane	<b>Transaction ID:</b> SA11AI.70570
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 460.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	66.21
<b>TOTAL</b> 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 22 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Steven Cherrier	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 1207 Holly Creek Lane	<b>Transaction ID:</b> SA11AI.70747
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 480.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Geoffrey Clasper	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 708 Pinehurst Drive	<b>Transaction ID:</b> SA11AI.70392
	City State Zip Code Chapel Hill NC 27517	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 880.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Geoffrey Clasper	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 708 Pinehurst Drive	<b>Transaction ID:</b> SA11AI.70571
	City State Zip Code Chapel Hill NC 27517	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 920.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	100.00
<b>TOTAL</b> 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 / 92  
(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 Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Geoffrey Clasper

Mailing Address 708 Pinehurst Drive

City State Zip Code  
Chapel Hill NC 27517

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

Name of Employer BCBSNC Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
960.00

Date of Receipt  
MM / DD / YYYY  
11 / 21 / 2008

**Transaction ID:** SA11AI.70748

Amount of Each Receipt this Period  
40.00

**B.**

Full Name (Last, First, Middle Initial)  
M Stephen Dean

Mailing Address 505 Lake Hogan Farm Rd

City State Zip Code  
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
984.33

Date of Receipt  
MM / DD / YYYY  
10 / 24 / 2008

**Transaction ID:** SA11AI.70401

Amount of Each Receipt this Period  
54.79

**C.**

Full Name (Last, First, Middle Initial)  
M Stephen Dean

Mailing Address 505 Lake Hogan Farm Rd

City State Zip Code  
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1039.12

Date of Receipt  
MM / DD / YYYY  
11 / 06 / 2008

**Transaction ID:** SA11AI.70580

Amount of Each Receipt this Period  
54.79

**SUBTOTAL** of Receipts This Page (optional) ..... ► **149.58**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) M Stephen Dean	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 505 Lake Hogan Farm Rd	<b>Transaction ID:</b> SA11AI.70757
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 54.79
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC      Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼      Aggregate Year-to-Date ▼ 1093.91	

<b>B.</b>	Full Name (Last, First, Middle Initial) G Diane DeGross	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address	<b>Transaction ID:</b> SA11AI.70759
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC      Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼      Aggregate Year-to-Date ▼ 225.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) M Karen Dickinson	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 105 Corewood Court	<b>Transaction ID:</b> SA11AI.70404
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 26.66
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC      Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼      Aggregate Year-to-Date ▼ 373.24	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	106.45
<b>TOTAL</b> 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 25 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) M Karen Dickinson	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 105 Corewood Court	<b>Transaction ID:</b> SA11AI.70583
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 26.66
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 399.90	

<b>B.</b>	Full Name (Last, First, Middle Initial) M Karen Dickinson	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 105 Corewood Court	<b>Transaction ID:</b> SA11AI.70760
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 26.66
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 426.56	

<b>C.</b>	Full Name (Last, First, Middle Initial) Lynn Duffy	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 111 Suffolk Place	<b>Transaction ID:</b> SA11AI.70407
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 52.35
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 1146.60	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	105.67
<b>TOTAL</b> 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 / 92  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code  
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1198.95

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 8

**Transaction ID:** SA11AI.70586

Amount of Each Receipt this Period  
52.35

**B.**

Full Name (Last, First, Middle Initial)  
Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code  
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1251.30

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

**Transaction ID:** SA11AI.70763

Amount of Each Receipt this Period  
52.35

**C.**

Full Name (Last, First, Middle Initial)  
James Emmons

Mailing Address 105 Vyne Court

City State Zip Code  
Cary NC 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1692.91

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 8

**Transaction ID:** SA11AI.70410

Amount of Each Receipt this Period  
77.88

**SUBTOTAL** of Receipts This Page (optional) ..... ► **182.58**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 / 92
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) James Emmons		Date of Receipt	
	Mailing Address 105 Vyne Court		M M / D D / Y Y Y Y Y 11 / 06 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70589
	Cary	NC	27519	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		77.88	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1770.79		

<b>B.</b>	Full Name (Last, First, Middle Initial) James Emmons		Date of Receipt	
	Mailing Address 105 Vyne Court		M M / D D / Y Y Y Y Y 11 / 21 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70766
	Cary	NC	27519	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		77.88	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1848.67		

<b>C.</b>	Full Name (Last, First, Middle Initial) M Robert Fleming		Date of Receipt	
	Mailing Address 211 St. Mary's Street		M M / D D / Y Y Y Y Y 10 / 24 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70411
	Raleigh	NC	27605	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		51.20	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1117.75		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	206.96
<b>TOTAL</b> 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 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) M Robert Fleming	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 211 St. Mary's Street	<b>Transaction ID:</b> SA11AI.70590
	City Raleigh State NC Zip Code 27605	Amount of Each Receipt this Period 51.20
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1168.95	

<b>B.</b>	Full Name (Last, First, Middle Initial) M Robert Fleming	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 211 St. Mary's Street	<b>Transaction ID:</b> SA11AI.70767
	City Raleigh State NC Zip Code 27605	Amount of Each Receipt this Period 51.20
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1220.15	

<b>C.</b>	Full Name (Last, First, Middle Initial) John Friesen	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 50009 Brogden	<b>Transaction ID:</b> SA11AI.70413
	City Chapel Hill State NC Zip Code 27514	Amount of Each Receipt this Period 105.17
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 2294.73	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>207.57</b>
<b>TOTAL</b> 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 29 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) John Friesen		Date of Receipt	
	Mailing Address 50009 Brogden		M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70592
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		105.17	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2399.90		

<b>B.</b>	Full Name (Last, First, Middle Initial) John Friesen		Date of Receipt	
	Mailing Address 50009 Brogden		M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70769
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		105.17	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2505.07		

<b>C.</b>	Full Name (Last, First, Middle Initial) Celia Fuller		Date of Receipt	
	Mailing Address 6114 Westglen Dr		M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70414
	Raleigh	NC	27612	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		40.62	
Name of Employer BCBSNC		Occupation Resource/Technical Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 885.84		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.96
<b>TOTAL</b> 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 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Celia Fuller		Date of Receipt
	Mailing Address 6114 Westglen Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 06 / 2008
	City	State	Zip Code
	Raleigh	NC	27612
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70593
Name of Employer BCBSNC		Occupation Resource/Technical Director	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 ▼ 926.46	<input type="text"/> 40.62

<b>B.</b>	Full Name (Last, First, Middle Initial) Celia Fuller		Date of Receipt
	Mailing Address 6114 Westglen Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 21 / 2008
	City	State	Zip Code
	Raleigh	NC	27612
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70770
Name of Employer BCBSNC		Occupation Resource/Technical Director	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 ▼ 967.08	<input type="text"/> 40.62

<b>C.</b>	Full Name (Last, First, Middle Initial) Kathi Gaines		Date of Receipt
	Mailing Address 603 Kingswood Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 24 / 2008
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70415
Name of Employer BCBSNC		Occupation Director	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 ▼ 1103.87	<input type="text"/> 50.51

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> <b>131.75</b>
<b>TOTAL</b> 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 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Kathi Gaines		Date of Receipt
	Mailing Address 603 Kingswood Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 6 / 2 0 0 8
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70594
Name of Employer BCBSNC		Occupation Director	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"/> 50.51
		<input type="text"/> 1154.38	

<b>B.</b>	Full Name (Last, First, Middle Initial) Kathi Gaines		Date of Receipt
	Mailing Address 603 Kingswood Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 2 1 / 2 0 0 8
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70771
Name of Employer BCBSNC		Occupation Director	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"/> 50.51
		<input type="text"/> 1204.89	

<b>C.</b>	Full Name (Last, First, Middle Initial) Lynne Garrison		Date of Receipt
	Mailing Address 806 Green Passage Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 4 / 2 0 0 8
	City	State	Zip Code
	Apex	NC	27502
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70417
Name of Employer BCBSNC		Occupation VP	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"/> 68.42
		<input type="text"/> 1498.54	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> <b>169.44</b>
<b>TOTAL</b> 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 32 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Lynne Garrison	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 806 Green Passage Lane	<b>Transaction ID:</b> SA11AI.70596
	City State Zip Code Apex NC 27502	Amount of Each Receipt this Period 68.42
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1566.96	

<b>B.</b>	Full Name (Last, First, Middle Initial) Lynne Garrison	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 806 Green Passage Lane	<b>Transaction ID:</b> SA11AI.70773
	City State Zip Code Apex NC 27502	Amount of Each Receipt this Period 68.42
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1635.38	

<b>C.</b>	Full Name (Last, First, Middle Initial) K Patrick Getzen	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 205 Chilcott	<b>Transaction ID:</b> SA11AI.70419
	City State Zip Code Apex NC 27502	Amount of Each Receipt this Period 66.49
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1447.63	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	203.33
<b>TOTAL</b> 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 33 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) K Patrick Getzen		Date of Receipt
	Mailing Address 205 Chilcott		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Apex	NC	27502
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70598
Name of Employer BCBSNC		Occupation VP	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"/>
		<input type="text"/> 1514.12	<input type="text"/> 66.49

<b>B.</b>	Full Name (Last, First, Middle Initial) K Patrick Getzen		Date of Receipt
	Mailing Address 205 Chilcott		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Apex	NC	27502
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70775
Name of Employer BCBSNC		Occupation VP	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"/>
		<input type="text"/> 1580.61	<input type="text"/> 66.49

<b>C.</b>	Full Name (Last, First, Middle Initial) Daniel Glaser		Date of Receipt
	Mailing Address 3613 Hathaway Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Durham	NC	27707
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70420
Name of Employer BCBSNC		Occupation SVP	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"/>
		<input type="text"/> 4230.60	<input type="text"/> 192.30

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 325.28
<b>TOTAL</b> 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 34 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Daniel Glaser		Date of Receipt MM / DD / YYYY 11 / 06 / 2008		
	Mailing Address 3613 Hathaway Road		<b>Transaction ID:</b> SA11AI.70599		
	City Durham	State NC	Zip Code 27707	Amount of Each Receipt this Period 192.30	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation SVP	Aggregate Year-to-Date 4422.90		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) Daniel Glaser		Date of Receipt MM / DD / YYYY 11 / 21 / 2008		
	Mailing Address 3613 Hathaway Road		<b>Transaction ID:</b> SA11AI.70776		
	City Durham	State NC	Zip Code 27707	Amount of Each Receipt this Period 192.30	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation SVP	Aggregate Year-to-Date 4615.20		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) K Ian Gordon		Date of Receipt MM / DD / YYYY 10 / 24 / 2008		
	Mailing Address 100 Village Circle Way Apt337		<b>Transaction ID:</b> SA11AI.70422		
	City Durham	State NC	Zip Code 27713	Amount of Each Receipt this Period 111.54	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation SVP	Aggregate Year-to-Date 2453.88		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	496.14
<b>TOTAL</b> 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 35 / 92  
(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 Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
K Ian Gordon

Mailing Address 100 Village Circle Way Apt337

City State Zip Code  
Durham NC 27713

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

Name of Employer Occupation  
BCBSNC SVP

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2565.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	0	8

Transaction ID: SA11AI.70601

Amount of Each Receipt this Period

111.54
--------

**B.**

Full Name (Last, First, Middle Initial)  
K Ian Gordon

Mailing Address 100 Village Circle Way Apt337

City State Zip Code  
Durham NC 27713

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

Name of Employer Occupation  
BCBSNC SVP

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2676.96

Date of Receipt

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

Transaction ID: SA11AI.70778

Amount of Each Receipt this Period

111.54
--------

**C.**

Full Name (Last, First, Middle Initial)  
Laura Gorry

Mailing Address 2566 Ironwood Drive

City State Zip Code  
Hickory NC 28602

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

Name of Employer Occupation  
BCBSNC Regional Service Manager

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 726.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	8

Transaction ID: SA11AI.70423

Amount of Each Receipt this Period

33.65
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**SUBTOTAL** of Receipts This Page (optional) ..... ▶

256.73
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**TOTAL** This Period (last page this line number only) ..... ▶

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 92  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Laura Gorry

Mailing Address 2566 Ironwood Drive

City State Zip Code  
Hickory NC 28602

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

Name of Employer BCBSNC Occupation Regional Service Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 759.95

Date of Receipt  
MM / DD / YYYY  
11 / 06 / 2008

**Transaction ID:** SA11AI.70602

Amount of Each Receipt this Period  
33.65

**B.**

Full Name (Last, First, Middle Initial)  
Laura Gorry

Mailing Address 2566 Ironwood Drive

City State Zip Code  
Hickory NC 28602

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

Name of Employer BCBSNC Occupation Regional Service Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 793.60

Date of Receipt  
MM / DD / YYYY  
11 / 21 / 2008

**Transaction ID:** SA11AI.70779

Amount of Each Receipt this Period  
33.65

**C.**

Full Name (Last, First, Middle Initial)  
Robert Greczyn

Mailing Address 113 Richelieu Dr.

City State Zip Code  
Cary NC 27511

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

Name of Employer BCBSNC Occupation President & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4230.60

Date of Receipt  
MM / DD / YYYY  
10 / 24 / 2008

**Transaction ID:** SA11AI.70424

Amount of Each Receipt this Period  
192.30

**SUBTOTAL** of Receipts This Page (optional) ..... ► **259.60**

**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 / 92  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Robert Greczyn

Mailing Address 113 Richelieu Dr.

City Cary State NC Zip Code 27511

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

Name of Employer BCBSNC Occupation President & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4422.90

Date of Receipt 11 / 06 / 2008

Transaction ID: SA11AI.70603

Amount of Each Receipt this Period 192.30

**B.**

Full Name (Last, First, Middle Initial)  
Robert Greczyn

Mailing Address 113 Richelieu Dr.

City Cary State NC Zip Code 27511

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

Name of Employer BCBSNC Occupation President & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4615.20

Date of Receipt 11 / 21 / 2008

Transaction ID: SA11AI.70780

Amount of Each Receipt this Period 192.30

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Darrell Grissom, II

Mailing Address 1105 New Hampshire Drive

City Jamestown State NC Zip Code 27282

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

Name of Employer BCBSNC Occupation Consumer Sales Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 298.32

Date of Receipt 10 / 24 / 2008

Transaction ID: SA11AI.70425

Amount of Each Receipt this Period 13.56

**SUBTOTAL** of Receipts This Page (optional) ..... ► 398.16

**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 38 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Darrell Grissom, II	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 1105 New Hampshire Drive	<b>Transaction ID:</b> SA11AI.70604
	City State Zip Code Jamestown NC 27282	Amount of Each Receipt this Period 13.56
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer BCBSNC	Occupation Consumer Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 311.88	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Darrell Grissom, II	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 1105 New Hampshire Drive	<b>Transaction ID:</b> SA11AI.70781
	City State Zip Code Jamestown NC 27282	Amount of Each Receipt this Period 13.56
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer BCBSNC	Occupation Consumer Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.44	

<b>C.</b>	Full Name (Last, First, Middle Initial) Danny Gunselman	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 3018 Annandale Road	<b>Transaction ID:</b> SA11AI.70426
	City State Zip Code Durham NC 27705	Amount of Each Receipt this Period 31.84
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 695.38	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	58.96
<b>TOTAL</b> 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 / 92  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Danny Gunselman

Mailing Address 3018 Annandale Road

City State Zip Code  
Durham NC 27705

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

Name of Employer BCBSNC Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 727.22

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 8

**Transaction ID:** SA11AI.70605

Amount of Each Receipt this Period  
31.84

**B.**

Full Name (Last, First, Middle Initial)  
Danny Gunselman

Mailing Address 3018 Annandale Road

City State Zip Code  
Durham NC 27705

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

Name of Employer BCBSNC Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 759.06

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

**Transaction ID:** SA11AI.70782

Amount of Each Receipt this Period  
31.84

**C.**

Full Name (Last, First, Middle Initial)  
Charles Harvey

Mailing Address 426 Holly Springs Dr

City State Zip Code  
Timberlake NC 27583

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

Name of Employer BCBSNC Occupation Inst. Designer & Developer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.22

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 8

**Transaction ID:** SA11AI.70428

Amount of Each Receipt this Period  
13.21

**SUBTOTAL** of Receipts This Page (optional) ..... ► 76.89

**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 40 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Charles Harvey	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 426 Holly Springs Dr	<b>Transaction ID:</b> SA11AI.70607
	City State Zip Code Timberlake NC 27583	Amount of Each Receipt this Period 13.21
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer BCBSNC	Occupation Inst. Designer & Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.43	

<b>B.</b>	Full Name (Last, First, Middle Initial) Charles Harvey	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 426 Holly Springs Dr	<b>Transaction ID:</b> SA11AI.70784
	City State Zip Code Timberlake NC 27583	Amount of Each Receipt this Period 13.21
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer BCBSNC	Occupation Inst. Designer & Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 314.64	

<b>C.</b>	Full Name (Last, First, Middle Initial) Patricia Hatfield	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 102 Oak Spring Court	<b>Transaction ID:</b> SA11AI.70430
	City State Zip Code Carrboro NC 27510	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer BCBSNC	Occupation Assoc. General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	36.42
<b>TOTAL</b> 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 / 92

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Patricia Hatfield

Mailing Address 102 Oak Spring Court

City State Zip Code  
Carrboro NC 27510

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

Name of Employer Occupation  
BCBSNC Assoc. General Counsel

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	0	8

Transaction ID: SA11AI.70609

Amount of Each Receipt this Period

10.00
-------

**B.**

Full Name (Last, First, Middle Initial)

Patricia Hatfield

Mailing Address 102 Oak Spring Court

City State Zip Code  
Carrboro NC 27510

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

Name of Employer Occupation  
BCBSNC Assoc. General Counsel

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

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

Transaction ID: SA11AI.70786

Amount of Each Receipt this Period

10.00
-------

**C.**

Full Name (Last, First, Middle Initial)

Sarah Hearn

Mailing Address 1181 Bowers Store Road

City State Zip Code  
Siler City NC 27344

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

Name of Employer Occupation  
BCBSNC Manager

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 426.67

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	8

Transaction ID: SA11AI.70433

Amount of Each Receipt this Period

19.46
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**SUBTOTAL** of Receipts This Page (optional) .....

39.46

**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 42 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Sarah Hearn	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 1181 Bowers Store Road	<b>Transaction ID:</b> SA11AI.70612
	City State Zip Code Siler City NC 27344	Amount of Each Receipt this Period 19.46
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 446.13	

<b>B.</b>	Full Name (Last, First, Middle Initial) Sarah Hearn	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 1181 Bowers Store Road	<b>Transaction ID:</b> SA11AI.70789
	City State Zip Code Siler City NC 27344	Amount of Each Receipt this Period 19.46
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 465.59	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms Susan Helm-Murtagh	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 117 Oldham Place	<b>Transaction ID:</b> SA11AI.70434
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 67.31
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Resource Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1298.83	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	106.23
<b>TOTAL</b> 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 43 / 92  
(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 Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City State Zip Code  
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation Resource Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1366.14

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 06 / 2008

**Transaction ID:** SA11AI.70613

Amount of Each Receipt this Period  
67.31

**B.**

Full Name (Last, First, Middle Initial)  
Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City State Zip Code  
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation Resource Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1433.45

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 21 / 2008

**Transaction ID:** SA11AI.70790

Amount of Each Receipt this Period  
67.31

**C.**

Full Name (Last, First, Middle Initial)  
Steven Hicks

Mailing Address 7512 Tylerton Dr

City State Zip Code  
Raleigh NC 27613

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

Name of Employer BCBSNC Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 24 / 2008

**Transaction ID:** SA11AI.70437

Amount of Each Receipt this Period  
10.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **144.62**

**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 44 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Steven Hicks		Date of Receipt
	Mailing Address 7512 Tylerton Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Raleigh	NC	27613
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.70616
Name of Employer BCBSNC		Occupation Director	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 ▼ 230.00	<input type="text"/> 10.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Steven Hicks		Date of Receipt
	Mailing Address 7512 Tylerton Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Raleigh	NC	27613
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.70793
Name of Employer BCBSNC		Occupation Director	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 ▼ 240.00	<input type="text"/> 10.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms Kathryn Higgins		Date of Receipt
	Mailing Address 734 Crabtree Crossing		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.70438
Name of Employer BCBSNC		Occupation Sr. Director	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 ▼ 702.00	<input type="text"/> 39.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 59.00
<b>TOTAL</b> 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 45 / 92  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Ms Kathryn Higgins

Mailing Address 734 Crabtree Crossing

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Sr. Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 741.00

Date of Receipt 11 / 06 / 2008  
**Transaction ID:** SA11AI.70617  
 Amount of Each Receipt this Period 39.00

**B.** Full Name (Last, First, Middle Initial)  
Ms Kathryn Higgins

Mailing Address 734 Crabtree Crossing

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Sr. Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt 11 / 21 / 2008  
**Transaction ID:** SA11AI.70794  
 Amount of Each Receipt this Period 39.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James Kenley, Sr.

Mailing Address 4670 Elmhurst Drive NE

City Hickory State NC Zip Code 28601

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

Name of Employer BCBSNC Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1818.77

Date of Receipt 10 / 24 / 2008  
**Transaction ID:** SA11AI.70449  
 Amount of Each Receipt this Period 83.31

**SUBTOTAL** of Receipts This Page (optional) ..... ► 161.31

**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 46 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. James Kenley, Sr.		Date of Receipt	
	Mailing Address 4670 Elmhurst Drive NE		M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70629
	Hickory	NC	28601	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		83.31	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1902.08		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. James Kenley, Sr.		Date of Receipt	
	Mailing Address 4670 Elmhurst Drive NE		M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70805
	Hickory	NC	28601	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		83.31	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1985.39		

<b>C.</b>	Full Name (Last, First, Middle Initial) Sean Kerns		Date of Receipt	
	Mailing Address		M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70450
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period	
			10.00	
Name of Employer BCBSNC		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	176.62
<b>TOTAL</b> 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 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Sean Kerns	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address	<b>Transaction ID:</b> SA11AI.70630
	City State Zip Code	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Sean Kerns	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address	<b>Transaction ID:</b> SA11AI.70806
	City State Zip Code	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00

<b>C.</b>	Full Name (Last, First, Middle Initial) M Eugenie Komives	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 3518 Bluestone Ct.	<b>Transaction ID:</b> SA11AI.70451
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 92.97
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Medical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2028.14

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	112.97
<b>TOTAL</b> 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 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) M Eugenie Komives		Date of Receipt	
	Mailing Address 3518 Bluestone Ct.		M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70631
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		92.97	
Name of Employer BCBSNC		Occupation Medical Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2121.11		

<b>B.</b>	Full Name (Last, First, Middle Initial) M Eugenie Komives		Date of Receipt	
	Mailing Address 3518 Bluestone Ct.		M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70807
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		92.97	
Name of Employer BCBSNC		Occupation Medical Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2214.08		

<b>C.</b>	Full Name (Last, First, Middle Initial) Theresa Kroliczak		Date of Receipt	
	Mailing Address 117 Aycock ave		M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70453
	Burlington	NC	27215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		63.46	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1201.90		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	249.40
<b>TOTAL</b> 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 49 / 92
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Theresa Kroliczak		Date of Receipt MM / DD / YYYY 11 / 06 / 2008		
	Mailing Address 117 Aycock ave		<b>Transaction ID:</b> SA11AI.70633		
	City Burlington	State NC	Zip Code 27215	Amount of Each Receipt this Period 63.46	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1265.36		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) Theresa Kroliczak		Date of Receipt MM / DD / YYYY 11 / 21 / 2008		
	Mailing Address 117 Aycock ave		<b>Transaction ID:</b> SA11AI.70809		
	City Burlington	State NC	Zip Code 27215	Amount of Each Receipt this Period 63.46	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1328.82		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) E George Lassiter		Date of Receipt MM / DD / YYYY 10 / 24 / 2008		
	Mailing Address 1106 Bellenden Drive		<b>Transaction ID:</b> SA11AI.70454		
	City Durham	State NC	Zip Code 27713	Amount of Each Receipt this Period 82.31	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1793.52		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	209.23
<b>TOTAL</b> 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 50 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) E George Lassiter		Date of Receipt MM / DD / YYYY 11 / 06 / 2008		
	Mailing Address 1106 Bellenden Drive		<b>Transaction ID:</b> SA11AI.70634		
	City Durham	State NC	Zip Code 27713	Amount of Each Receipt this Period 82.31	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1875.83		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) E George Lassiter		Date of Receipt MM / DD / YYYY 11 / 21 / 2008		
	Mailing Address 1106 Bellenden Drive		<b>Transaction ID:</b> SA11AI.70810		
	City Durham	State NC	Zip Code 27713	Amount of Each Receipt this Period 82.31	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1958.14		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) Dr. Dayna Lucas		Date of Receipt MM / DD / YYYY 10 / 24 / 2008		
	Mailing Address 121 Breckenridge Pl		<b>Transaction ID:</b> SA11AI.70456		
	City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Medical Director	Aggregate Year-to-Date 550.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	189.62
<b>TOTAL</b> 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 51 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Dr. Dayna Lucas		Date of Receipt
	Mailing Address 121 Breckenridge Pl		<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
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70636
Name of Employer BCBSNC		Occupation Medical Director	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 ▼ 575.00	<input type="text"/> 25.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Dr. Dayna Lucas		Date of Receipt
	Mailing Address 121 Breckenridge Pl		<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
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70812
Name of Employer BCBSNC		Occupation Medical Director	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 ▼ 600.00	<input type="text"/> 25.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Debra MacClennan		Date of Receipt
	Mailing Address 400 Lakeshore Lane		<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
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70458
Name of Employer BCBSNC		Occupation VP	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 ▼ 1692.68	<input type="text"/> 76.94

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 126.94
<b>TOTAL</b> 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 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Debra MacClennan	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 400 Lakeshore Lane	<b>Transaction ID:</b> SA11AI.70638
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 76.94
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1769.62	

<b>B.</b>	Full Name (Last, First, Middle Initial) Debra MacClennan	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 400 Lakeshore Lane	<b>Transaction ID:</b> SA11AI.70814
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 76.94
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1846.56	

<b>C.</b>	Full Name (Last, First, Middle Initial) Joe McDowell	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 165 Farmington Road	<b>Transaction ID:</b> SA11AI.70461
	City State Zip Code Grimesland NC 27837	Amount of Each Receipt this Period 16.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer BCBSNC	Occupation Regional Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 352.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>169.88</b>
<b>TOTAL</b> 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 / 92  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Joe McDowell

Mailing Address 165 Farmington Road

City State Zip Code  
Grimesland NC 27837

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

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 368.00

Date of Receipt  
MM / DD / YYYY  
11 / 06 / 2008

**Transaction ID:** SA11AI.70641

Amount of Each Receipt this Period  
16.00

**B.**

Full Name (Last, First, Middle Initial)  
Joe McDowell

Mailing Address 165 Farmington Road

City State Zip Code  
Grimesland NC 27837

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

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 384.00

Date of Receipt  
MM / DD / YYYY  
11 / 21 / 2008

**Transaction ID:** SA11AI.70817

Amount of Each Receipt this Period  
16.00

**C.**

Full Name (Last, First, Middle Initial)  
Lynn McNeal

Mailing Address 185 Swansea Lane

City State Zip Code  
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2106.22

Date of Receipt  
MM / DD / YYYY  
10 / 24 / 2008

**Transaction ID:** SA11AI.70464

Amount of Each Receipt this Period  
96.16

**SUBTOTAL** of Receipts This Page (optional) ..... ► **128.16**

**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 54 / 92  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.**

Full Name (Last, First, Middle Initial) Lynn McNeal		Date of Receipt MM / DD / YYYY 11 / 06 / 2008	
Mailing Address 185 Swansea Lane		<b>Transaction ID:</b> SA11AI.70644	
City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 96.16
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2202.38		

**B.**

Full Name (Last, First, Middle Initial) Lynn McNeal		Date of Receipt MM / DD / YYYY 11 / 21 / 2008	
Mailing Address 185 Swansea Lane		<b>Transaction ID:</b> SA11AI.70820	
City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 96.16
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2298.54		

**C.**

Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 105 Songbird Lane		<b>Transaction ID:</b> SA11AI.70466	
City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 18.67
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation Sr. OD Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 408.04		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	210.99
<b>TOTAL</b> 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 55 / 92
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt MM / DD / YYYY 11 / 06 / 2008		
	Mailing Address 105 Songbird Lane		<b>Transaction ID:</b> SA11AI.70646		
	City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 18.67	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Sr. OD Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 426.71			

<b>B.</b>	Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt MM / DD / YYYY 11 / 21 / 2008		
	Mailing Address 105 Songbird Lane		<b>Transaction ID:</b> SA11AI.70822		
	City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 18.67	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Sr. OD Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 445.38			

<b>C.</b>	Full Name (Last, First, Middle Initial) Kathryn Millican		Date of Receipt MM / DD / YYYY 10 / 24 / 2008		
	Mailing Address 1632 Lorraine Road		<b>Transaction ID:</b> SA11AI.70467		
	City Raleigh	State NC	Zip Code 27607	Amount of Each Receipt this Period 18.99	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 404.82			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	56.33
<b>TOTAL</b> 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 56 / 92
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Kathryn Millican		Date of Receipt MM / DD / YYYY 11 / 06 / 2008		
	Mailing Address 1632 Lorraine Road		<b>Transaction ID:</b> SA11AI.70647		
	City Raleigh	State NC	Zip Code 27607	Amount of Each Receipt this Period 18.99	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 423.81			

<b>B.</b>	Full Name (Last, First, Middle Initial) Kathryn Millican		Date of Receipt MM / DD / YYYY 11 / 21 / 2008		
	Mailing Address 1632 Lorraine Road		<b>Transaction ID:</b> SA11AI.70823		
	City Raleigh	State NC	Zip Code 27607	Amount of Each Receipt this Period 18.99	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 442.80			

<b>C.</b>	Full Name (Last, First, Middle Initial) J Heidi Musser		Date of Receipt MM / DD / YYYY 10 / 24 / 2008		
	Mailing Address 104 Academy Rove Dr.		<b>Transaction ID:</b> SA11AI.70470		
	City Durham	State NC	Zip Code 27705	Amount of Each Receipt this Period 99.04	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1757.14			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	137.02
<b>TOTAL</b> 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 57 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) J Heidi Musser		Date of Receipt MM / DD / YYYY 11 / 06 / 2008		
	Mailing Address 104 Academy Rove Dr.		<b>Transaction ID:</b> SA11AI.70650		
	City Durham	State NC	Zip Code 27705	Amount of Each Receipt this Period 99.04	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1856.18		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) J Heidi Musser		Date of Receipt MM / DD / YYYY 11 / 21 / 2008		
	Mailing Address 104 Academy Rove Dr.		<b>Transaction ID:</b> SA11AI.70826		
	City Durham	State NC	Zip Code 27705	Amount of Each Receipt this Period 99.04	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1955.22		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms Linda Norwood		Date of Receipt MM / DD / YYYY 10 / 24 / 2008		
	Mailing Address 1131 Fleming Road		<b>Transaction ID:</b> SA11AI.70472		
	City Creedmoor	State NC	Zip Code 27522	Amount of Each Receipt this Period 11.69	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Supervisor	Aggregate Year-to-Date 257.18		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	209.77
<b>TOTAL</b> 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 58 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms Linda Norwood		Date of Receipt MM / DD / YYYY 11 / 06 / 2008		
	Mailing Address 1131 Fleming Road		<b>Transaction ID:</b> SA11AI.70652		
	City Creedmoor	State NC	Zip Code 27522	Amount of Each Receipt this Period 11.69	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Supervisor	Aggregate Year-to-Date 268.87		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms Linda Norwood		Date of Receipt MM / DD / YYYY 11 / 21 / 2008		
	Mailing Address 1131 Fleming Road		<b>Transaction ID:</b> SA11AI.70828		
	City Creedmoor	State NC	Zip Code 27522	Amount of Each Receipt this Period 11.69	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Supervisor	Aggregate Year-to-Date 280.56		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) Maureen OConnor		Date of Receipt MM / DD / YYYY 10 / 24 / 2008		
	Mailing Address 104 Beeston Ct.		<b>Transaction ID:</b> SA11AI.70475		
	City Morrisville	State NC	Zip Code 27560	Amount of Each Receipt this Period 192.30	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation SVP	Aggregate Year-to-Date 4230.60		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	215.68
<b>TOTAL</b> 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 59 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Maureen OConnor	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 104 Beeston Ct.	<b>Transaction ID:</b> SA11AI.70655
	City State Zip Code Morrisville NC 27560	Amount of Each Receipt this Period 192.30
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4422.90	

<b>B.</b>	Full Name (Last, First, Middle Initial) Maureen OConnor	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 104 Beeston Ct.	<b>Transaction ID:</b> SA11AI.70831
	City State Zip Code Morrisville NC 27560	Amount of Each Receipt this Period 192.30
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4615.20	

<b>C.</b>	Full Name (Last, First, Middle Initial) Fara Palumbo	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 1000 Gloucester Ct	<b>Transaction ID:</b> SA11AI.70478
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 72.12
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1557.58	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	456.72
<b>TOTAL</b> 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 60 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Fara Palumbo		Date of Receipt	
	Mailing Address 1000 Gloucester Ct		M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70658
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		72.12	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1629.70		

<b>B.</b>	Full Name (Last, First, Middle Initial) Fara Palumbo		Date of Receipt	
	Mailing Address 1000 Gloucester Ct		M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70834
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		72.12	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1701.82		

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael J Parkerson		Date of Receipt	
	Mailing Address 7504 Clayshant Court		M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70480
	Wake Forest	NC	27587	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		25.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	169.24
<b>TOTAL</b> 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 61 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael J Parkerson		Date of Receipt
	Mailing Address 7504 Clayshant Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 11 / 06 / 2008
	City	State	Zip Code
	Wake Forest	NC	27587
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70660
Name of Employer BCBSNC		Occupation VP	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 ▼ 575.00	<input type="text"/> 25.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael J Parkerson		Date of Receipt
	Mailing Address 7504 Clayshant Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 11 / 21 / 2008
	City	State	Zip Code
	Wake Forest	NC	27587
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70836
Name of Employer BCBSNC		Occupation VP	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 ▼ 600.00	<input type="text"/> 25.00

<b>C.</b>	Full Name (Last, First, Middle Initial) M David Patrick		Date of Receipt
	Mailing Address 2811 Montcastle Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 10 / 24 / 2008
	City	State	Zip Code
	Durham	NC	27705
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70481
Name of Employer BCBSNC		Occupation VP	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 ▼ 880.00	<input type="text"/> 40.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 90.00
<b>TOTAL</b> 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 62 / 92  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
M David Patrick

Mailing Address 2811 Montcastle Court

City State Zip Code  
Durham NC 27705

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

Name of Employer BCBSNC Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 920.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	0	8

**Transaction ID:** SA11AI.70661

Amount of Each Receipt this Period  
40.00

**B.**

Full Name (Last, First, Middle Initial)  
M David Patrick

Mailing Address 2811 Montcastle Court

City State Zip Code  
Durham NC 27705

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

Name of Employer BCBSNC Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 960.00

Date of Receipt  

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

**Transaction ID:** SA11AI.70837

Amount of Each Receipt this Period  
40.00

**C.**

Full Name (Last, First, Middle Initial)  
M Silas Payne

Mailing Address 2306 Buckquarter Farms Rd

City State Zip Code  
Hillsborough NC 27278

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

Name of Employer BCBSNC Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	8

**Transaction ID:** SA11AI.70482

Amount of Each Receipt this Period  
10.00

**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: (check only one)	PAGE 63 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) M Silas Payne	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 2306 Buckquarter Farms Rd	<b>Transaction ID:</b> SA11AI.70662
	City Hillsborough State NC Zip Code 27278	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 230.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) M Silas Payne	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 2306 Buckquarter Farms Rd	<b>Transaction ID:</b> SA11AI.70838
	City Hillsborough State NC Zip Code 27278	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 240.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Gerald Petkau	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 402 Troycott Place	<b>Transaction ID:</b> SA11AI.70484
	City Cary State NC Zip Code 27519	Amount of Each Receipt this Period 128.45
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 2557.75	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>148.45</b>
<b>TOTAL</b> 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 64 / 92

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Gerald Petkau

Mailing Address 402 Troycott Place

City State Zip Code  
Cary NC 27519

FEC ID number of contributing federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
VP

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

2686.20

Date of Receipt

MM / DD / YYYY  
11 / 06 / 2008

Transaction ID: SA11AI.70664

Amount of Each Receipt this Period

128.45

**B.**

Full Name (Last, First, Middle Initial)

Gerald Petkau

Mailing Address 402 Troycott Place

City State Zip Code  
Cary NC 27519

FEC ID number of contributing federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
VP

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

2814.65

Date of Receipt

MM / DD / YYYY  
11 / 21 / 2008

Transaction ID: SA11AI.70840

Amount of Each Receipt this Period

128.45

**C.**

Full Name (Last, First, Middle Initial)

Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City State Zip Code  
Durham NC 27713

FEC ID number of contributing federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
Director

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

654.94

Date of Receipt

MM / DD / YYYY  
10 / 24 / 2008

Transaction ID: SA11AI.70487

Amount of Each Receipt this Period

29.77

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

286.67

**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 65 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Jocelyn Pickett	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 203 Chancellor's Ridge	<b>Transaction ID:</b> SA11AI.70667
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 29.77
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC      Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼      Aggregate Year-to-Date ▼ 684.71	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jocelyn Pickett	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 203 Chancellor's Ridge	<b>Transaction ID:</b> SA11AI.70843
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 29.77
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC      Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼      Aggregate Year-to-Date ▼ 714.48	

<b>C.</b>	Full Name (Last, First, Middle Initial) A Tracy Pickett	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 4123 Brenmar's Lane	<b>Transaction ID:</b> SA11AI.70488
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 14.85
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC      Occupation Sr. System Test Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼      Aggregate Year-to-Date ▼ 323.85	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	74.39
<b>TOTAL</b> 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 66 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) A Tracy Pickett		Date of Receipt
	Mailing Address 4123 Brenmar's Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 06 / 2008
	City	State	Zip Code
	Durham	NC	27713
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70668
Name of Employer BCBSNC		Occupation Sr. System Test Specialist	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 ▼ 338.70	<input type="text"/> 14.85

<b>B.</b>	Full Name (Last, First, Middle Initial) A Tracy Pickett		Date of Receipt
	Mailing Address 4123 Brenmar's Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 21 / 2008
	City	State	Zip Code
	Durham	NC	27713
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70844
Name of Employer BCBSNC		Occupation Sr. System Test Specialist	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 ▼ 353.55	<input type="text"/> 14.85

<b>C.</b>	Full Name (Last, First, Middle Initial) K Nathan Prather		Date of Receipt
	Mailing Address 319 Montibello Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 24 / 2008
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70491
Name of Employer BCBSNC		Occupation VP	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 ▼ 660.00	<input type="text"/> 30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 59.70
<b>TOTAL</b> 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 67 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) K Nathan Prather		Date of Receipt
	Mailing Address 319 Montibello Drive		<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.70671
Name of Employer BCBSNC		Occupation VP	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="690.00"/>	<input type="text" value="30.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) K Nathan Prather		Date of Receipt
	Mailing Address 319 Montibello Drive		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.70847
Name of Employer BCBSNC		Occupation VP	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="720.00"/>	<input type="text" value="30.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt
	Mailing Address 236 Coachlight Trail		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Burlington	NC	27215
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.70495
Name of Employer BCBSNC		Occupation Project Manager	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="643.97"/>	<input type="text" value="29.56"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="89.56"/>
<b>TOTAL</b> 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 68 / 92  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.**

Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt MM / DD / YYYY 11 / 06 / 2008
Mailing Address 236 Coachlight Trail		<b>Transaction ID:</b> SA11AI.70675
City Burlington	State NC	Zip Code 27215
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 29.56
Name of Employer BCBSNC	Occupation Project Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 673.53	

**B.**

Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt MM / DD / YYYY 11 / 21 / 2008
Mailing Address 236 Coachlight Trail		<b>Transaction ID:</b> SA11AI.70851
City Burlington	State NC	Zip Code 27215
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 29.56
Name of Employer BCBSNC	Occupation Project Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 703.09	

**C.**

Full Name (Last, First, Middle Initial) Mr. Harry Reynolds, Jr.		Date of Receipt MM / DD / YYYY 10 / 24 / 2008
Mailing Address 1201 Summerville Lane		<b>Transaction ID:</b> SA11AI.70496
City Durham	State NC	Zip Code 27712
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 81.04
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1751.88	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>140.16</b>
<b>TOTAL</b> 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 69 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Harry Reynolds, Jr.		Date of Receipt	
	Mailing Address 1201 Summerville Lane		M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70676
	Durham	NC	27712	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		81.04	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1832.92		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Harry Reynolds, Jr.		Date of Receipt	
	Mailing Address 1201 Summerville Lane		M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70852
	Durham	NC	27712	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		81.04	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1913.96		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Daniel Risku		Date of Receipt	
	Mailing Address 105 San Miguel Place		M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70498
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		101.53	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2226.66		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	263.61
<b>TOTAL</b> 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 70 / 92	
	(check only one)			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Daniel Risku		Date of Receipt																					
	Mailing Address 105 San Miguel Place		<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>1</td><td>/</td><td>0</td><td>6</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	1	/	0	6	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1	/	0	6	/	2	0	0	8														
	City State Zip Code Chapel Hill NC 27514		<b>Transaction ID:</b> SA11AI.70678																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 101.53																						
Name of Employer BCBSNC Occupation VP		Aggregate Year-to-Date ▼ 2328.19																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Daniel Risku		Date of Receipt																					
	Mailing Address 105 San Miguel Place		<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>1</td><td>/</td><td>2</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	1	/	2	1	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1	/	2	1	/	2	0	0	8														
	City State Zip Code Chapel Hill NC 27514		<b>Transaction ID:</b> SA11AI.70854																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 101.53																						
Name of Employer BCBSNC Occupation VP		Aggregate Year-to-Date ▼ 2429.72																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. John Roos		Date of Receipt																					
	Mailing Address 119 Draymore Way		<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>0</td><td>/</td><td>2</td><td>4</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	0	/	2	4	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0	/	2	4	/	2	0	0	8														
	City State Zip Code Morrisville NC 27560		<b>Transaction ID:</b> SA11AI.70501																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 192.30																						
Name of Employer BCBSNC Occupation SVP		Aggregate Year-to-Date ▼ 4230.60																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>395.36</b>
<b>TOTAL</b> 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 71 / 92  
(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 Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Mr. John Roos

Mailing Address 119 Draymore Way

City State Zip Code  
Morrisville NC 27560

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

Name of Employer BCBSNC Occupation SVP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4422.90

Date of Receipt  
MM / DD / YYYY  
11 / 06 / 2008

**Transaction ID:** SA11AI.70680

Amount of Each Receipt this Period  
192.30

**B.**

Full Name (Last, First, Middle Initial)  
Mr. John Roos

Mailing Address 119 Draymore Way

City State Zip Code  
Morrisville NC 27560

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

Name of Employer BCBSNC Occupation SVP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4615.20

Date of Receipt  
MM / DD / YYYY  
11 / 21 / 2008

**Transaction ID:** SA11AI.70856

Amount of Each Receipt this Period  
192.30

**C.**

Full Name (Last, First, Middle Initial)  
V Tarsha Rowland

Mailing Address 5021 Robinwood Rd

City State Zip Code  
Durham NC 27713

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

Name of Employer BCBSNC Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
679.11

Date of Receipt  
MM / DD / YYYY  
10 / 24 / 2008

**Transaction ID:** SA11AI.70502

Amount of Each Receipt this Period  
32.68

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **417.28**

**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 72 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) V Tarsha Rowland		Date of Receipt
	Mailing Address 5021 Robinwood Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 6 / 2 0 0 8
	City	State	Zip Code
	Durham	NC	27713
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70681
Name of Employer BCBSNC		Occupation Director	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"/> 711.79	<input type="text"/> 32.68

<b>B.</b>	Full Name (Last, First, Middle Initial) V Tarsha Rowland		Date of Receipt
	Mailing Address 5021 Robinwood Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 2 1 / 2 0 0 8
	City	State	Zip Code
	Durham	NC	27713
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70857
Name of Employer BCBSNC		Occupation Director	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"/> 744.47	<input type="text"/> 32.68

<b>C.</b>	Full Name (Last, First, Middle Initial) A Leon Sabarsky		Date of Receipt
	Mailing Address		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 4 / 2 0 0 8
	City	State	Zip Code
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70503
	Name of Employer BCBSNC		Occupation Program Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 261.84	<input type="text"/> 32.73

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 98.09
<b>TOTAL</b> 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 73 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) A Leon Sabarsky		Date of Receipt
	Mailing Address		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 6 / 2 0 0 8
	City State Zip Code		<b>Transaction ID:</b> SA11AI.70682
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <input type="text"/> 32.73
	Name of Employer BCBSNC	Occupation Program Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 294.57	

<b>B.</b>	Full Name (Last, First, Middle Initial) A Leon Sabarsky		Date of Receipt
	Mailing Address		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 2 1 / 2 0 0 8
	City State Zip Code		<b>Transaction ID:</b> SA11AI.70858
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <input type="text"/> 32.73
	Name of Employer BCBSNC	Occupation Program Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 327.30	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mike Serozi		Date of Receipt
	Mailing Address 128 Lochwood Dr. West		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 4 / 2 0 0 8
	City State Zip Code Cary NC 27511		<b>Transaction ID:</b> SA11AI.70507
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <input type="text"/> 45.12
	Name of Employer BCBSNC	Occupation Resource/Technical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 985.44	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 110.58
<b>TOTAL</b> 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 74 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mike Serozi	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 128 Lochwood Dr. West	<b>Transaction ID:</b> SA11AI.70686
	City State Zip Code Cary NC 27511	Amount of Each Receipt this Period 45.12
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC      Occupation Resource/Technical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1030.56	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mike Serozi	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 128 Lochwood Dr. West	<b>Transaction ID:</b> SA11AI.70862
	City State Zip Code Cary NC 27511	Amount of Each Receipt this Period 45.12
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC      Occupation Resource/Technical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1075.68	

<b>C.</b>	Full Name (Last, First, Middle Initial) E Ronald Smith	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 34 Forked Pine Ct	<b>Transaction ID:</b> SA11AI.70509
	City State Zip Code Chapel Hill NC 27517	Amount of Each Receipt this Period 70.77
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC      Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1507.44	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>161.01</b>
<b>TOTAL</b> 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 75 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) E Ronald Smith		Date of Receipt MM / DD / YYYY 11 / 06 / 2008		
	Mailing Address 34 Forked Pine Ct		<b>Transaction ID:</b> SA11AI.70688		
	City Chapel Hill	State NC	Zip Code 27517	Amount of Each Receipt this Period 70.77	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1578.21		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) E Ronald Smith		Date of Receipt MM / DD / YYYY 11 / 21 / 2008		
	Mailing Address 34 Forked Pine Ct		<b>Transaction ID:</b> SA11AI.70864		
	City Chapel Hill	State NC	Zip Code 27517	Amount of Each Receipt this Period 70.77	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date 1648.98		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) William Smith		Date of Receipt MM / DD / YYYY 10 / 24 / 2008		
	Mailing Address 303 Lynden Valley Court		<b>Transaction ID:</b> SA11AI.70511		
	City Cary	State NC	Zip Code 27519	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director	Aggregate Year-to-Date 440.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	161.54
<b>TOTAL</b> 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 76 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) William Smith	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 303 Lynden Valley Court	<b>Transaction ID:</b> SA11AI.70690
	City State Zip Code Cary NC 27519	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC      Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼      Aggregate Year-to-Date ▼ 460.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) William Smith	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 303 Lynden Valley Court	<b>Transaction ID:</b> SA11AI.70866
	City State Zip Code Cary NC 27519	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC      Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼      Aggregate Year-to-Date ▼ 480.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) John Sternbergh	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 3726 St. Mark's Road	<b>Transaction ID:</b> SA11AI.70513
	City State Zip Code Durham * NC 27707	Amount of Each Receipt this Period 133.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC      Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼      Aggregate Year-to-Date ▼ 2883.17	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	173.48
<b>TOTAL</b> 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 77 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) John Sternbergh		Date of Receipt MM / DD / YYYY 11 / 06 / 2008		
	Mailing Address 3726 St. Mark's Road		<b>Transaction ID:</b> SA11AI.70692		
	City Durham *	State NC	Zip Code 27707	Amount of Each Receipt this Period 133.48	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation SVP	Aggregate Year-to-Date 3016.65		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) John Sternbergh		Date of Receipt MM / DD / YYYY 11 / 21 / 2008		
	Mailing Address 3726 St. Mark's Road		<b>Transaction ID:</b> SA11AI.70868		
	City Durham *	State NC	Zip Code 27707	Amount of Each Receipt this Period 133.48	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation SVP	Aggregate Year-to-Date 3150.13		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) Mark Stinneford		Date of Receipt MM / DD / YYYY 10 / 24 / 2008		
	Mailing Address 104 Aborfield Court		<b>Transaction ID:</b> SA11AI.70515		
	City Cary	State NC	Zip Code 27513	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Manager	Aggregate Year-to-Date 220.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	276.96
<b>TOTAL</b> 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 78 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mark Stinneford		Date of Receipt
	Mailing Address 104 Aborfield Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 06 / 2008
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70694
Name of Employer BCBSNC		Occupation Manager	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"/> 230.00	<input type="text"/> 10.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Mark Stinneford		Date of Receipt
	Mailing Address 104 Aborfield Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 21 / 2008
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70870
Name of Employer BCBSNC		Occupation Manager	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"/> 240.00	<input type="text"/> 10.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard Supinski		Date of Receipt
	Mailing Address 2610 Lochmore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 24 / 2008
	City	State	Zip Code
	Raleigh	NC	27608
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.70520
Name of Employer BCBSNC		Occupation Director	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"/> 660.00	<input type="text"/> 30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 50.00
<b>TOTAL</b> 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 79 / 92  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Richard Supinski  
Mailing Address 2610 Lochmore Drive

City Raleigh State NC Zip Code 27608

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

Name of Employer BCBSNC Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

Date of Receipt 11 / 06 / 2008  
**Transaction ID:** SA11AI.70699  
 Amount of Each Receipt this Period 30.00

**B.** Full Name (Last, First, Middle Initial)  
Richard Supinski  
Mailing Address 2610 Lochmore Drive

City Raleigh State NC Zip Code 27608

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

Name of Employer BCBSNC Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt 11 / 21 / 2008  
**Transaction ID:** SA11AI.70875  
 Amount of Each Receipt this Period 30.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Carol Sutton  
Mailing Address 22101 Spring Meadow Dr.

City Chapel Hill State NC Zip Code 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1137.94

Date of Receipt 10 / 24 / 2008  
**Transaction ID:** SA11AI.70521  
 Amount of Each Receipt this Period 52.07

**SUBTOTAL** of Receipts This Page (optional) ..... ► 112.07

**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 80 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mrs. Carol Sutton	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 22101 Spring Meadow Dr.	<b>Transaction ID:</b> SA11AI.70700
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 52.07
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1190.01	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mrs. Carol Sutton	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 22101 Spring Meadow Dr.	<b>Transaction ID:</b> SA11AI.70876
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 52.07
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1242.08	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jeanne Wallander	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 3404 Bluet Ct	<b>Transaction ID:</b> SA11AI.70527
	City State Zip Code Holly Springs NC 27540	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 760.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	144.14
<b>TOTAL</b> 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 81 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Jeanne Wallander		Date of Receipt
	Mailing Address 3404 Bluet Ct		<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Holly Springs	NC	27540
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.70706
Name of Employer BCBSNC		Occupation VP	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="40.00"/>
		<input type="text" value="800.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jeanne Wallander		Date of Receipt
	Mailing Address 3404 Bluet Ct		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Holly Springs	NC	27540
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.70882
Name of Employer BCBSNC		Occupation VP	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="40.00"/>
		<input type="text" value="840.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jason Weinstein		Date of Receipt
	Mailing Address 1604 Foreman Street		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Hillsborough	NC	27278
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.70530
Name of Employer BCBSNC		Occupation Resource Manager	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="26.29"/>
		<input type="text" value="570.59"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="106.29"/>
<b>TOTAL</b> 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 82 / 92  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.**

Full Name (Last, First, Middle Initial) Jeffrey Weinstock		Date of Receipt MM / DD / YYYY 10 / 24 / 2008	
Mailing Address 102 Tremont Circle		<b>Transaction ID:</b> SA11AI.70531	
City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 28.80
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 633.60		

**B.**

Full Name (Last, First, Middle Initial) Jeffrey Weinstock		Date of Receipt MM / DD / YYYY 11 / 06 / 2008	
Mailing Address 102 Tremont Circle		<b>Transaction ID:</b> SA11AI.70709	
City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 28.80
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 662.40		

**C.**

Full Name (Last, First, Middle Initial) Jeffrey Weinstock		Date of Receipt MM / DD / YYYY 11 / 21 / 2008	
Mailing Address 102 Tremont Circle		<b>Transaction ID:</b> SA11AI.70885	
City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 28.80
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 691.20		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	86.40
<b>TOTAL</b> 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 83 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Dionne Wells		Date of Receipt	
	Mailing Address 9228 Cornwell Dr		M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70532
	Wake Forest	NC	27587	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		10.00	
Name of Employer BCBSNC		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Dionne Wells		Date of Receipt	
	Mailing Address 9228 Cornwell Dr		M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70710
	Wake Forest	NC	27587	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		10.00	
Name of Employer BCBSNC		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Dionne Wells		Date of Receipt	
	Mailing Address 9228 Cornwell Dr		M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.70886
	Wake Forest	NC	27587	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		10.00	
Name of Employer BCBSNC		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	30.00
<b>TOTAL</b> 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 84 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Kimberly Whiteurs	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 3008 Cardinal Lake Dr	<b>Transaction ID:</b> SA11AI.70534
	City State Zip Code Durham NC 27704	Amount of Each Receipt this Period 15.74
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Senior Business Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 341.08	

<b>B.</b>	Full Name (Last, First, Middle Initial) Kimberly Whiteurs	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 3008 Cardinal Lake Dr	<b>Transaction ID:</b> SA11AI.70712
	City State Zip Code Durham NC 27704	Amount of Each Receipt this Period 15.74
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Senior Business Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 356.82	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kimberly Whiteurs	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 3008 Cardinal Lake Dr	<b>Transaction ID:</b> SA11AI.70888
	City State Zip Code Durham NC 27704	Amount of Each Receipt this Period 15.74
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Senior Business Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 372.56	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	47.22
<b>TOTAL</b> 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 85 / 92

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Mr. James Wilson

Mailing Address 227 Midenhall Way

City State Zip Code  
Cary NC 27513

FEC ID number of contributing federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
SVP

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

4230.60

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.70536

Amount of Each Receipt this Period

192.30

**B.**

Full Name (Last, First, Middle Initial)

Mr. James Wilson

Mailing Address 227 Midenhall Way

City State Zip Code  
Cary NC 27513

FEC ID number of contributing federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
SVP

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

4422.90

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.70714

Amount of Each Receipt this Period

192.30

**C.**

Full Name (Last, First, Middle Initial)

Mr. James Wilson

Mailing Address 227 Midenhall Way

City State Zip Code  
Cary NC 27513

FEC ID number of contributing federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
SVP

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

4615.20

Date of Receipt

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

Transaction ID: SA11AI.70890

Amount of Each Receipt this Period

192.30

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

576.90

**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 86 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin		Date of Receipt																					
	Mailing Address 100 Palmyra Place		<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>0</td><td></td><td>2</td><td>4</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	0		2	4		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		2	4		2	0	0	8														
	City State Zip Code Chapel Hill NC 27514		<b>Transaction ID:</b> SA11AI.70538																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																						
Name of Employer: BCBSNC Occupation: VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1917.55		88.35																						

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin		Date of Receipt																					
	Mailing Address 100 Palmyra Place		<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>1</td><td></td><td>0</td><td>6</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	1		0	6		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1		0	6		2	0	0	8														
	City State Zip Code Chapel Hill NC 27514		<b>Transaction ID:</b> SA11AI.70716																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																						
Name of Employer: BCBSNC Occupation: VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2005.90		88.35																						

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin		Date of Receipt																					
	Mailing Address 100 Palmyra Place		<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>1</td><td></td><td>2</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	1		2	1		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1		2	1		2	0	0	8														
	City State Zip Code Chapel Hill NC 27514		<b>Transaction ID:</b> SA11AI.70892																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																						
Name of Employer: BCBSNC Occupation: VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2094.25		88.35																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	265.05
<b>TOTAL</b> 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 87 / 92
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Kenneth Wright	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 618 S. Wingate Dr.	<b>Transaction ID:</b> SA11AI.70539
	City State Zip Code Wake Forest NC 27587	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC    Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 825.20	

<b>B.</b>	Full Name (Last, First, Middle Initial) Kenneth Wright	Date of Receipt MM / DD / YYYY 11 / 06 / 2008
	Mailing Address 618 S. Wingate Dr.	<b>Transaction ID:</b> SA11AI.70717
	City State Zip Code Wake Forest NC 27587	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC    Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 863.20	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kenneth Wright	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 618 S. Wingate Dr.	<b>Transaction ID:</b> SA11AI.70893
	City State Zip Code Wake Forest NC 27587	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC    Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 901.20	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>114.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>13660.98</b>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 88 / 92

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Larry Kissell

Mailing Address PO Box 536

City Biscoe State NC Zip Code 27209

Purpose of Disbursement  
debit retirement

Candidate Name  
Larry Kissell

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23.70914

Date of Disbursement

<sup>M</sup> 1	<sup>M</sup> 1	/	<sup>D</sup> 1	<sup>D</sup> 8	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 0	<sup>Y</sup> 8
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Amount of Each Disbursement this Period

2500.00
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**SUBTOTAL** of Disbursements This Page (optional) ..... ►

2500.00
---------

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

2500.00
---------

**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)

<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Jeff Barnhardt <hr/> Mailing Address PO Box 969 <hr/> City Concord State NC Zip Code 28026 <hr/> Purpose of Disbursement contribution Candidate Name Jeff Barnhardt Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.70895 Date of Disbursement 10 / 16 / 2008 <hr/> Amount of Each Disbursement this Period 500.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Stan Bingham <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement contribution Candidate Name Stan Bingham Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.70898 Date of Disbursement 10 / 21 / 2008 <hr/> Amount of Each Disbursement this Period 750.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Julia Boseman <hr/> Mailing Address 1526 Porthsmouth PI <hr/> City Wilmington State NC Zip Code 28405 <hr/> Purpose of Disbursement contribution Candidate Name Julia Boseman Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District: 09	Transaction ID: SB29.70907 Date of Disbursement 10 / 21 / 2008 <hr/> Amount of Each Disbursement this Period 500.00

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

1750.00

**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)

PAGE 90 / 92

<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bruce Goforth <hr/> Mailing Address 137 Stonecrest Dr. <hr/> City Asheville State NC Zip Code 28803 <hr/> Purpose of Disbursement contribution Candidate Name Goforth, Bruce Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.70908 Date of Disbursement 10 / 28 / 2008 <hr/> Amount of Each Disbursement this Period 1000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Sen. Fletcher L. Hartsell, Jr. <hr/> Mailing Address PO Box 1709 <hr/> City Concord State NC Zip Code 28026 <hr/> Purpose of Disbursement contribution Candidate Name Sen. Fletcher L. Hartsell, Jr. Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.70899 Date of Disbursement 10 / 16 / 2008 <hr/> Amount of Each Disbursement this Period 1000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Linda Johnson <hr/> Mailing Address 1205 Berkshire Dr. <hr/> City Kannapolis State NC Zip Code 28081 <hr/> Purpose of Disbursement contribution Candidate Name Linda Johnson Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.70897 Date of Disbursement 10 / 21 / 2008 <hr/> Amount of Each Disbursement this Period 500.00

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

2500.00

**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)

<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Davy Lowman	Transaction ID: SB29.70901 Date of Disbursement 10 / 21 / 2008
	Mailing Address 3908 fallston Rd	Amount of Each Disbursement this Period 500.00
	City Shelby State NC Zip Code 28150	
	Purpose of Disbursement contribution Candidate Name Davy Lowman Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Tim Moore	Transaction ID: SB29.70900 Date of Disbursement 10 / 21 / 2008
	Mailing Address 813 W. Mountain St.	Amount of Each Disbursement this Period 500.00
	City Kings Mountain State NC Zip Code 28086	
	Purpose of Disbursement contribution Candidate Name Moore, Tim Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Bonner Stiller	Transaction ID: SB29.70913 Date of Disbursement 11 / 18 / 2008
	Mailing Address 4908 E. Yacht Drive	Amount of Each Disbursement this Period -750.00
	City Oak Island State NC Zip Code 28465	
	Purpose of Disbursement canceled contribution check Candidate Name Bonner Stiller Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	250.00
<b>TOTAL</b> 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 Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Cullie Tarleton <hr/> Mailing Address PO Box 1269 <hr/> City Blowing Rock State NC Zip Code 28605 <hr/> Purpose of Disbursement contribution Candidate Name Cullie Tarleton Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.70909 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Jane Whilden <hr/> Mailing Address 8 Busbee Rd <hr/> City Asheville State NC Zip Code 28803 <hr/> Purpose of Disbursement contribution Candidate Name Jane Whilden Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.70904 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1000.00

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

5500.00