

**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

☐Check if different
than previously
reported. (ACC)

Durham

NC

27702

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00312223

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☒January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2007

through

12

31

2007

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

01

08

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

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

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

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		24699.60
(b) Cash on Hand at Beginning of Reporting Period	56303.10	
(c) Total Receipts (from Line 19)	51568.68	103688.38
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	107871.78	128387.98
7. Total Disbursements (from Line 31)	37596.70	58112.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	70275.08	70275.08
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

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

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

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	46682.47	82427.98
(i) Itemized (use Schedule A)		
(ii) Unitemized	4886.21	21260.40
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	51568.68	103688.38
(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) ➤	51568.68	103688.38
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))	51568.68	103688.38
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	51568.68	103688.38

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15500.00	26500.00
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	96.70	112.90
(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))	96.70	112.90
29. Other Disbursements.....	22000.00	31500.00
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))..	37596.70	58112.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	37596.70	58112.90

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	51568.68	103688.38
34. Total Contribution Refunds (from Line 28(d))	96.70	112.90
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	51471.98	103575.48
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

H Jorgenia Abernathy

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64368

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

H Jorgenia Abernathy

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64528

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

H Jorgenia Abernathy

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64687

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: PAGE 7 / 305

(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)

H Jorgenia Abernathy

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64845

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

H Jorgenia Abernathy

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65003

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

H Jorgenia Abernathy

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65161

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: PAGE 8 / 305

(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)

H Jorgenia Abernathy

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65319

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

H Jorgenia Abernathy

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

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

Transaction ID: SA11AI.65478

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

H Jorgenia Abernathy

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

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 6 / 2 0 0 7

Transaction ID: SA11AI.65635

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: PAGE 9 / 305

(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)

H Jorgenia Abernathy

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65792

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

H Jorgenia Abernathy

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

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

Transaction ID: SA11AI.65986

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

H Jorgenia Abernathy

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.66144

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: PAGE 10 / 305

(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)

H Jorgenia Abernathy

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

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

Transaction ID: SA11AI.66316

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Frances Adams

Mailing Address 1 Chatham Lane

City

State

Zip Code

Chapel Hill

NC

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: SA11AI.65480

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Frances Adams

Mailing Address 1 Chatham Lane

City

State

Zip Code

Chapel Hill

NC

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

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 6 / 2 0 0 7

Transaction ID: SA11AI.65637

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 305

(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)

Frances Adams

Mailing Address 1 Chatham Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Manager

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	9	/	2	0	0	7

Transaction ID: SA11AI.65794

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Frances Adams

Mailing Address 1 Chatham Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Manager

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	7

Transaction ID: SA11AI.65988

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Frances Adams

Mailing Address 1 Chatham Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.66146

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 12 / 305

(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)

Frances Adams

Mailing Address 1 Chatham Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: SA11AI.66318

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Bradley Adcock

Mailing Address 106 Lindenthal Court

City

Cary

State

NC

Zip Code

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1379.74

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64371

Amount of Each Receipt this Period

99.76

C.

Full Name (Last, First, Middle Initial)

Bradley Adcock

Mailing Address 106 Lindenthal Court

City

Cary

State

NC

Zip Code

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1479.50

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64531

Amount of Each Receipt this Period

99.76

SUBTOTAL of Receipts This Page (optional)

209.52

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 13 / 305

(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)

Bradley Adcock

Mailing Address 106 Lindenthal Court

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.26

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64690

Amount of Each Receipt this Period

99.76

B.

Full Name (Last, First, Middle Initial)

Bradley Adcock

Mailing Address 106 Lindenthal Court

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1679.02

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64848

Amount of Each Receipt this Period

99.76

C.

Full Name (Last, First, Middle Initial)

Bradley Adcock

Mailing Address 106 Lindenthal Court

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1778.78

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65006

Amount of Each Receipt this Period

99.76

SUBTOTAL of Receipts This Page (optional)

299.28

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 14 / 305

(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)

Bradley Adcock

Mailing Address 106 Lindenthal Court

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1878.54

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65164

Amount of Each Receipt this Period

99.76

B.

Full Name (Last, First, Middle Initial)

Bradley Adcock

Mailing Address 106 Lindenthal Court

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1978.30

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65322

Amount of Each Receipt this Period

99.76

C.

Full Name (Last, First, Middle Initial)

Bradley Adcock

Mailing Address 106 Lindenthal Court

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2078.06

Date of Receipt

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

Transaction ID: SA11AI.65481

Amount of Each Receipt this Period

99.76

SUBTOTAL of Receipts This Page (optional)

299.28

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 305

(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)

Bradley Adcock

Mailing Address 106 Lindenthal Court

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2177.82

Date of Receipt

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

Transaction ID: SA11AI.65638

Amount of Each Receipt this Period

99.76

B.

Full Name (Last, First, Middle Initial)

Bradley Adcock

Mailing Address 106 Lindenthal Court

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2277.58

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65795

Amount of Each Receipt this Period

99.76

C.

Full Name (Last, First, Middle Initial)

Bradley Adcock

Mailing Address 106 Lindenthal Court

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2377.34

Date of Receipt

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

Transaction ID: SA11AI.65989

Amount of Each Receipt this Period

99.76

SUBTOTAL of Receipts This Page (optional)

299.28

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 16 / 305

(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)

Bradley Adcock

Mailing Address 106 Lindenthal Court

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2477.10

Date of Receipt

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

Transaction ID: SA11AI.66147

Amount of Each Receipt this Period

99.76

B.

Full Name (Last, First, Middle Initial)

Bradley Adcock

Mailing Address 106 Lindenthal Court

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2576.86

Date of Receipt

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

Transaction ID: SA11AI.66319

Amount of Each Receipt this Period

99.76

C.

Full Name (Last, First, Middle Initial)

William Alberti

Mailing Address 5347 Yardley Terrace

City

State

Zip Code

Durham

NC

27707

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Assoc. General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.91

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64372

Amount of Each Receipt this Period

24.39

SUBTOTAL of Receipts This Page (optional)

223.91

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 305

(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)

William Alberti

Mailing Address 5347 Yardley Terrace

City

Durham

State

NC

Zip Code

27707

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Assoc. General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64532

Amount of Each Receipt this Period

24.39

B.

Full Name (Last, First, Middle Initial)

William Alberti

Mailing Address 5347 Yardley Terrace

City

Durham

State

NC

Zip Code

27707

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Assoc. General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.69

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64691

Amount of Each Receipt this Period

24.39

C.

Full Name (Last, First, Middle Initial)

William Alberti

Mailing Address 5347 Yardley Terrace

City

Durham

State

NC

Zip Code

27707

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Assoc. General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

411.08

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64849

Amount of Each Receipt this Period

24.39

SUBTOTAL of Receipts This Page (optional)

73.17

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 18 / 305

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

A.

Full Name (Last, First, Middle Initial)

William Alberti

Mailing Address 5347 Yardley Terrace

City

Durham

State

NC

Zip Code

27707

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Assoc. General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.47

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65007

Amount of Each Receipt this Period

24.39

B.

Full Name (Last, First, Middle Initial)

William Alberti

Mailing Address 5347 Yardley Terrace

City

Durham

State

NC

Zip Code

27707

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Assoc. General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.86

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65165

Amount of Each Receipt this Period

24.39

C.

Full Name (Last, First, Middle Initial)

William Alberti

Mailing Address 5347 Yardley Terrace

City

Durham

State

NC

Zip Code

27707

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Assoc. General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.25

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65323

Amount of Each Receipt this Period

24.39

SUBTOTAL of Receipts This Page (optional)

73.17

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 19 / 305

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☒ 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)

William Alberti

Mailing Address 5347 Yardley Terrace

City

Durham

State

NC

Zip Code

27707

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Assoc. General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.64

Date of Receipt

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

Transaction ID: SA11AI.65482

Amount of Each Receipt this Period

24.39

B.

Full Name (Last, First, Middle Initial)

William Alberti

Mailing Address 5347 Yardley Terrace

City

Durham

State

NC

Zip Code

27707

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Assoc. General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.03

Date of Receipt

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

Transaction ID: SA11AI.65639

Amount of Each Receipt this Period

24.39

C.

Full Name (Last, First, Middle Initial)

William Alberti

Mailing Address 5347 Yardley Terrace

City

Durham

State

NC

Zip Code

27707

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Assoc. General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.42

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65796

Amount of Each Receipt this Period

24.39

SUBTOTAL of Receipts This Page (optional)

73.17

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 305

(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)

William Alberti

Mailing Address 5347 Yardley Terrace

City State Zip Code
Durham NC 27707

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Assoc. General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.81

Date of Receipt

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

Transaction ID: SA11AI.65990

Amount of Each Receipt this Period

24.39

B.

Full Name (Last, First, Middle Initial)

William Alberti

Mailing Address 5347 Yardley Terrace

City State Zip Code
Durham NC 27707

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Assoc. General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.20

Date of Receipt

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

Transaction ID: SA11AI.66148

Amount of Each Receipt this Period

24.39

C.

Full Name (Last, First, Middle Initial)

William Alberti

Mailing Address 5347 Yardley Terrace

City State Zip Code
Durham NC 27707

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Assoc. General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.59

Date of Receipt

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

Transaction ID: SA11AI.66320

Amount of Each Receipt this Period

24.39

SUBTOTAL of Receipts This Page (optional)

73.17

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 21 / 305

(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)

John Armentrout

Mailing Address 108 Woodleaf Dr

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: SA11AI.65484

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

John Armentrout

Mailing Address 108 Woodleaf Dr

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: SA11AI.65641

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

John Armentrout

Mailing Address 108 Woodleaf Dr

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65798

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 22 / 305

(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)

John Armentrout

Mailing Address 108 Woodleaf Dr

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.65992

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

John Armentrout

Mailing Address 108 Woodleaf Dr

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.66150

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

John Armentrout

Mailing Address 108 Woodleaf Dr

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: SA11AI.66322

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 305

(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)

Daniel Atherton

Mailing Address 8800 Hatton Court

City

Charlotte

State

NC

Zip Code

28277

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 ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	7	/	2	0	0	7

Transaction ID: SA11AI.64375

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Daniel Atherton

Mailing Address 8800 Hatton Court

City

Charlotte

State

NC

Zip Code

28277

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 ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	0	/	2	0	0	7

Transaction ID: SA11AI.64535

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Daniel Atherton

Mailing Address 8800 Hatton Court

City

Charlotte

State

NC

Zip Code

28277

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 ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	0	7

Transaction ID: SA11AI.64694

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 24 / 305

(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)

Daniel Atherton

Mailing Address 8800 Hatton Court

City

Charlotte

State

NC

Zip Code

28277

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 ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64852

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Daniel Atherton

Mailing Address 8800 Hatton Court

City

Charlotte

State

NC

Zip Code

28277

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65010

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Daniel Atherton

Mailing Address 8800 Hatton Court

City

Charlotte

State

NC

Zip Code

28277

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 ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65168

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 305

(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)

Daniel Atherton

Mailing Address 8800 Hatton Court

City

Charlotte

State

NC

Zip Code

28277

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 ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	8	/	2	0	0	7

Transaction ID: SA11AI.65326

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Daniel Atherton

Mailing Address 8800 Hatton Court

City

Charlotte

State

NC

Zip Code

28277

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 ▼

525.00

Date of Receipt

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

Transaction ID: SA11AI.65485

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Daniel Atherton

Mailing Address 8800 Hatton Court

City

Charlotte

State

NC

Zip Code

28277

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 ▼

550.00

Date of Receipt

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

Transaction ID: SA11AI.65642

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 305

(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)

Daniel Atherton

Mailing Address 8800 Hatton Court

City

Charlotte

State

NC

Zip Code

28277

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 ▼

575.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	7

Transaction ID: SA11AI.65799

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Daniel Atherton

Mailing Address 8800 Hatton Court

City

Charlotte

State

NC

Zip Code

28277

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 ▼

600.00

Date of Receipt

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

Transaction ID: SA11AI.65993

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Daniel Atherton

Mailing Address 8800 Hatton Court

City

Charlotte

State

NC

Zip Code

28277

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 ▼

625.00

Date of Receipt

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

Transaction ID: SA11AI.66151

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 27 / 305

(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)

Daniel Atherton

Mailing Address 8800 Hatton Court

City

Charlotte

State

NC

Zip Code

28277

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 ▼

650.00

Date of Receipt

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

Transaction ID: SA11AI.66323

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Jacky Baker

Mailing Address P O Box 3648

City

Hickory

State

NC

Zip Code

28603

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: SA11AI.65487

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Jacky Baker

Mailing Address P O Box 3648

City

Hickory

State

NC

Zip Code

28603

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Sales Manager

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 6 / 2 0 0 7

Transaction ID: SA11AI.65644

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 28 / 305

(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)

Jacky Baker

Mailing Address P O Box 3648

City

Hickory

State

NC

Zip Code

28603

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65801

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Jacky Baker

Mailing Address P O Box 3648

City

Hickory

State

NC

Zip Code

28603

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.65995

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Jacky Baker

Mailing Address P O Box 3648

City

Hickory

State

NC

Zip Code

28603

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.66153

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 29 / 305

(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)

Jacky Baker

Mailing Address P O Box 3648

City

Hickory

State

NC

Zip Code

28603

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Sales Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: SA11AI.66325

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Tracy Bennett

Mailing Address 208 Linville Springs Rd.

City

Kernersville

State

NC

Zip Code

27248

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 ▼

210.00

Date of Receipt

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

Transaction ID: SA11AI.65489

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Tracy Bennett

Mailing Address 208 Linville Springs Rd.

City

Kernersville

State

NC

Zip Code

27248

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
1 0 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.65646

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 305

(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)

Tracy Bennett

Mailing Address 208 Linville Springs Rd.

City

Kernersville

State

NC

Zip Code

27248

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Director

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	9	/	2	0	0	7

Transaction ID: SA11AI.65803

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Tracy Bennett

Mailing Address 208 Linville Springs Rd.

City

Kernersville

State

NC

Zip Code

27248

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Director

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	7

Transaction ID: SA11AI.65997

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Tracy Bennett

Mailing Address 208 Linville Springs Rd.

City

Kernersville

State

NC

Zip Code

27248

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.66155

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 31 / 305

(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)

Tracy Bennett

Mailing Address 208 Linville Springs Rd.

City

Kernersville

State

NC

Zip Code

27248

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 ▼

260.00

Date of Receipt

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

Transaction ID: SA11AI.66327

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Gary Bolt

Mailing Address 4801 Highgate Drive

City

Durham

State

NC

Zip Code

27713

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 ▼

736.58

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64381

Amount of Each Receipt this Period

53.67

C.

Full Name (Last, First, Middle Initial)

Gary Bolt

Mailing Address 4801 Highgate Drive

City

Durham

State

NC

Zip Code

27713

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 ▼

790.25

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64541

Amount of Each Receipt this Period

53.67

SUBTOTAL of Receipts This Page (optional)

117.34

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 32 / 305

(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)

Gary Bolt

Mailing Address 4801 Highgate Drive

City

Durham

State

NC

Zip Code

27713

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 ▼

843.92

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64700

Amount of Each Receipt this Period

53.67

B.

Full Name (Last, First, Middle Initial)

Gary Bolt

Mailing Address 4801 Highgate Drive

City

Durham

State

NC

Zip Code

27713

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 ▼

897.59

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64858

Amount of Each Receipt this Period

53.67

C.

Full Name (Last, First, Middle Initial)

Gary Bolt

Mailing Address 4801 Highgate Drive

City

Durham

State

NC

Zip Code

27713

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 ▼

951.26

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65016

Amount of Each Receipt this Period

53.67

SUBTOTAL of Receipts This Page (optional)

161.01

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 33 / 305

(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)

Gary Bolt

Mailing Address 4801 Highgate Drive

City

Durham

State

NC

Zip Code

27713

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 ▼

1004.93

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65174

Amount of Each Receipt this Period

53.67

B.

Full Name (Last, First, Middle Initial)

Gary Bolt

Mailing Address 4801 Highgate Drive

City

Durham

State

NC

Zip Code

27713

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 ▼

1058.60

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65332

Amount of Each Receipt this Period

53.67

C.

Full Name (Last, First, Middle Initial)

Gary Bolt

Mailing Address 4801 Highgate Drive

City

Durham

State

NC

Zip Code

27713

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 ▼

1112.27

Date of Receipt

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

Transaction ID: SA11AI.65491

Amount of Each Receipt this Period

53.67

SUBTOTAL of Receipts This Page (optional)

161.01

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 305

(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)

Gary Bolt

Mailing Address 4801 Highgate Drive

City

Durham

State

NC

Zip Code

27713

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1165.94

Date of Receipt

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

Transaction ID: SA11AI.65648

Amount of Each Receipt this Period

53.67

B.

Full Name (Last, First, Middle Initial)

Gary Bolt

Mailing Address 4801 Highgate Drive

City

Durham

State

NC

Zip Code

27713

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1219.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	7

Transaction ID: SA11AI.65805

Amount of Each Receipt this Period

53.67

C.

Full Name (Last, First, Middle Initial)

Gary Bolt

Mailing Address 4801 Highgate Drive

City

Durham

State

NC

Zip Code

27713

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.28

Date of Receipt

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

Transaction ID: SA11AI.65999

Amount of Each Receipt this Period

53.67

SUBTOTAL of Receipts This Page (optional)

161.01

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 35 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A.

Full Name (Last, First, Middle Initial)

Gary Bolt

Mailing Address 4801 Highgate Drive

City

Durham

State

NC

Zip Code

27713

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 ▼

1326.95

Date of Receipt

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

Transaction ID: SA11AI.66157

Amount of Each Receipt this Period

53.67

B.

Full Name (Last, First, Middle Initial)

Gary Bolt

Mailing Address 4801 Highgate Drive

City

Durham

State

NC

Zip Code

27713

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 ▼

1380.62

Date of Receipt

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

Transaction ID: SA11AI.66329

Amount of Each Receipt this Period

53.67

C.

Full Name (Last, First, Middle Initial)

H Lewis Borman

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.32

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65333

Amount of Each Receipt this Period

14.88

SUBTOTAL of Receipts This Page (optional)

122.22

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 36 / 305

(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)

H Lewis Borman

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.20

Date of Receipt

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

Transaction ID: SA11AI.65492

Amount of Each Receipt this Period

14.88

B.

Full Name (Last, First, Middle Initial)

H Lewis Borman

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.08

Date of Receipt

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

Transaction ID: SA11AI.65649

Amount of Each Receipt this Period

14.88

C.

Full Name (Last, First, Middle Initial)

H Lewis Borman

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.96

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65806

Amount of Each Receipt this Period

14.88

SUBTOTAL of Receipts This Page (optional)

44.64

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 / 305

(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)

H Lewis Borman

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.84

Date of Receipt

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

Transaction ID: SA11AI.66000

Amount of Each Receipt this Period

14.88

B.

Full Name (Last, First, Middle Initial)

H Lewis Borman

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.72

Date of Receipt

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

Transaction ID: SA11AI.66158

Amount of Each Receipt this Period

14.88

C.

Full Name (Last, First, Middle Initial)

H Lewis Borman

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.60

Date of Receipt

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

Transaction ID: SA11AI.66330

Amount of Each Receipt this Period

14.88

SUBTOTAL of Receipts This Page (optional)

44.64

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 305

(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)

W Don Bradley

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	7	/	2	0	0	7

Transaction ID: SA11AI.64383

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

W Don Bradley

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	0	/	2	0	0	7

Transaction ID: SA11AI.64543

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

W Don Bradley

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	0	7

Transaction ID: SA11AI.64702

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 39 / 305

(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)

W Don Bradley

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64860

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

W Don Bradley

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65018

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

W Don Bradley

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65176

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 40 / 305

(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)

W Don Bradley

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65334

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

W Don Bradley

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.65493

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

W Don Bradley

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: SA11AI.65650

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 41 / 305

(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)

W Don Bradley

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

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 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65807

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

W Don Bradley

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

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

Transaction ID: SA11AI.66001

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

W Don Bradley

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

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

Transaction ID: SA11AI.66159

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 42 / 305

(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)

W Don Bradley

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: SA11AI.66331

Amount of Each Receipt this Period

100.00

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64385

Amount of Each Receipt this Period

25.00

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64545

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 43 / 305

(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)

Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City

Raleigh

State

NC

Zip Code

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64704

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City

Raleigh

State

NC

Zip Code

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 ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64862

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City

Raleigh

State

NC

Zip Code

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65020

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 305

(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)

Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City

Raleigh

State

NC

Zip Code

27613

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	0	7

Transaction ID: SA11AI.65178

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City

Raleigh

State

NC

Zip Code

27613

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	0	7

Transaction ID: SA11AI.65336

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City

Raleigh

State

NC

Zip Code

27613

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

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

Transaction ID: SA11AI.65495

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 45 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A.

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 ▼

550.00

Date of Receipt

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

Transaction ID: SA11AI.65652

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 ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65809

Amount of Each Receipt this Period

25.00

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 ▼

600.00

Date of Receipt

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

Transaction ID: SA11AI.66003

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 46 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Milo Brunick

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State

NC

Zip Code

27613

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

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

Transaction ID: SA11AI.66163

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City

Raleigh

State

NC

Zip Code

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 ▼

650.00

Date of Receipt

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

Transaction ID: SA11AI.66334

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Michele Cash

Mailing Address 8094 Grassy Creek Road

City

Oxford

State

NC

Zip Code

27565

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Senior Compensation Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64391

Amount of Each Receipt this Period

25.19

SUBTOTAL of Receipts This Page (optional)

75.19

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 47 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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State

NC

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27565

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Senior Compensation Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.91

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64551

Amount of Each Receipt this Period

25.19

B.

Full Name (Last, First, Middle Initial)

Michele Cash

Mailing Address 8094 Grassy Creek Road

City

Oxford

State

NC

Zip Code

27565

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Senior Compensation Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.10

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64710

Amount of Each Receipt this Period

25.19

C.

Full Name (Last, First, Middle Initial)

Michele Cash

Mailing Address 8094 Grassy Creek Road

City

Oxford

State

NC

Zip Code

27565

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Senior Compensation Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.29

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64867

Amount of Each Receipt this Period

25.19

SUBTOTAL of Receipts This Page (optional)

75.57

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 48 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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federal political committee.

C

Name of Employer
BCBSNC

Occupation

Senior Compensation Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.48

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65026

Amount of Each Receipt this Period

25.19

B.

Full Name (Last, First, Middle Initial)

Michele Cash

Mailing Address 8094 Grassy Creek Road

City

Oxford

State

NC

Zip Code

27565

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Senior Compensation Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.67

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65183

Amount of Each Receipt this Period

25.19

C.

Full Name (Last, First, Middle Initial)

Michele Cash

Mailing Address 8094 Grassy Creek Road

City

Oxford

State

NC

Zip Code

27565

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Senior Compensation Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.86

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65341

Amount of Each Receipt this Period

25.19

SUBTOTAL of Receipts This Page (optional)

75.57

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 49 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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City

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Zip Code

27565

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Senior Compensation Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.05

Date of Receipt

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

Transaction ID: SA11AI.65500

Amount of Each Receipt this Period

25.19

B.

Full Name (Last, First, Middle Initial)

Michele Cash

Mailing Address 8094 Grassy Creek Road

City

Oxford

State

NC

Zip Code

27565

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Senior Compensation Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.24

Date of Receipt

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

Transaction ID: SA11AI.65657

Amount of Each Receipt this Period

25.19

C.

Full Name (Last, First, Middle Initial)

Michele Cash

Mailing Address 8094 Grassy Creek Road

City

Oxford

State

NC

Zip Code

27565

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Senior Compensation Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.43

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65814

Amount of Each Receipt this Period

25.19

SUBTOTAL of Receipts This Page (optional)

75.57

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 50 / 305

(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)

Michele Cash

Mailing Address 8094 Grassy Creek Road

City

Oxford

State

NC

Zip Code

27565

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Senior Compensation Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.62

Date of Receipt

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

Transaction ID: SA11AI.66008

Amount of Each Receipt this Period

25.19

B.

Full Name (Last, First, Middle Initial)

Michele Cash

Mailing Address 8094 Grassy Creek Road

City

Oxford

State

NC

Zip Code

27565

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Senior Compensation Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

603.81

Date of Receipt

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

Transaction ID: SA11AI.66168

Amount of Each Receipt this Period

25.19

C.

Full Name (Last, First, Middle Initial)

Michele Cash

Mailing Address 8094 Grassy Creek Road

City

Oxford

State

NC

Zip Code

27565

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Senior Compensation Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.00

Date of Receipt

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

Transaction ID: SA11AI.66341

Amount of Each Receipt this Period

25.19

SUBTOTAL of Receipts This Page (optional)

75.57

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 51 / 305

(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)

Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	7	/	2	0	0	7

Transaction ID: SA11AI.64393

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	0	/	2	0	0	7

Transaction ID: SA11AI.64553

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City

Chapel Hill

State

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Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	0	7

Transaction ID: SA11AI.64712

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 52 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A.

Full Name (Last, First, Middle Initial)

Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City

Chapel Hill

State

NC

Zip Code

27516

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64869

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City

Chapel Hill

State

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65028

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City

Chapel Hill

State

NC

Zip Code

27516

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 ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65185

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 53 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65343

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Steven Cherrier

Mailing Address 1207 Holly Creek Lane

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State

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C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

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

Transaction ID: SA11AI.65502

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City

Chapel Hill

State

NC

Zip Code

27516

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 ▼

425.00

Date of Receipt

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

Transaction ID: SA11AI.65659

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 54 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65816

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City

Chapel Hill

State

NC

Zip Code

27516

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 ▼

465.00

Date of Receipt

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

Transaction ID: SA11AI.66010

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City

Chapel Hill

State

NC

Zip Code

27516

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 ▼

485.00

Date of Receipt

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

Transaction ID: SA11AI.66170

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 305

(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)

Steven Cherrier

Mailing Address 1207 Holly Creek Lane

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

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

Transaction ID: SA11AI.66343

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Mark Coyne

Mailing Address 121 Graylyn Drive

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	7	/	2	0	0	7

Transaction ID: SA11AI.64396

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Mark Coyne

Mailing Address 121 Graylyn Drive

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	0	/	2	0	0	7

Transaction ID: SA11AI.64556

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 56 / 305

(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)

Mark Coyne

Mailing Address 121 Graylyn Drive

City

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State

NC

Zip Code

27516

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 ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64715

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Mark Coyne

Mailing Address 121 Graylyn Drive

City

Chapel Hill

State

NC

Zip Code

27516

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64872

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Mark Coyne

Mailing Address 121 Graylyn Drive

City

Chapel Hill

State

NC

Zip Code

27516

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 ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65031

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 57 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65346

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Lynn Duffy

Mailing Address 111 Suffolk Place

City

Chapel Hill

State

NC

Zip Code

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 ▼

522.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64406

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Lynn Duffy

Mailing Address 111 Suffolk Place

City

Chapel Hill

State

NC

Zip Code

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 ▼

562.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64566

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 58 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Lynn Duffy

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27516

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

602.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64725

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Lynn Duffy

Mailing Address 111 Suffolk Place

City

Chapel Hill

State

NC

Zip Code

27516

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

642.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64882

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Lynn Duffy

Mailing Address 111 Suffolk Place

City

Chapel Hill

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27516

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

682.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65041

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: PAGE 59 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

722.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65197

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Lynn Duffy

Mailing Address 111 Suffolk Place

City

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State

NC

Zip Code

27516

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

762.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65356

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Lynn Duffy

Mailing Address 111 Suffolk Place

City

Chapel Hill

State

NC

Zip Code

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 ▼

802.00

Date of Receipt

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

Transaction ID: SA11AI.65513

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: PAGE 60 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name (Last, First, Middle Initial)

Lynn Duffy

Mailing Address 111 Suffolk Place

City

Chapel Hill

State

NC

Zip Code

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 ▼

842.00

Date of Receipt

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

Transaction ID: SA11AI.65671

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Lynn Duffy

Mailing Address 111 Suffolk Place

City

Chapel Hill

State

NC

Zip Code

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 ▼

882.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65827

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Lynn Duffy

Mailing Address 111 Suffolk Place

City

Chapel Hill

State

NC

Zip Code

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 ▼

922.00

Date of Receipt

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

Transaction ID: SA11AI.66021

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: PAGE 61 / 305

(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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Full Name (Last, First, Middle Initial)

Lynn Duffy

Mailing Address 111 Suffolk Place

City

Chapel Hill

State

NC

Zip Code

27516

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federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

962.00

Date of Receipt

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

Transaction ID: SA11AI.66183

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Lynn Duffy

Mailing Address 111 Suffolk Place

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1013.33

Date of Receipt

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

Transaction ID: SA11AI.66355

Amount of Each Receipt this Period

51.33

C.

Full Name (Last, First, Middle Initial)

James Emmons

Mailing Address 105 Vyne Court

City

Cary

State

NC

Zip Code

27519

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

892.10

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	7	/	2	0	0	7

Transaction ID: SA11AI.64409

Amount of Each Receipt this Period

68.64

SUBTOTAL of Receipts This Page (optional)

159.97

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 62 / 305

(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)

James Emmons

Mailing Address 105 Vyne Court

City

Cary

State

NC

Zip Code

27519

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

986.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	0	/	2	0	0	7

Transaction ID: SA11AI.64569

Amount of Each Receipt this Period

94.38

B.

Full Name (Last, First, Middle Initial)

James Emmons

Mailing Address 105 Vyne Court

City

Cary

State

NC

Zip Code

27519

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1060.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	0	7

Transaction ID: SA11AI.64728

Amount of Each Receipt this Period

73.79

C.

Full Name (Last, First, Middle Initial)

James Emmons

Mailing Address 105 Vyne Court

City

Cary

State

NC

Zip Code

27519

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	7	/	2	0	0	7

Transaction ID: SA11AI.64885

Amount of Each Receipt this Period

73.79

SUBTOTAL of Receipts This Page (optional)

241.96

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 63 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A.

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 ▼

1207.85

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65044

Amount of Each Receipt this Period

73.79

B.

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 ▼

1281.64

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65200

Amount of Each Receipt this Period

73.79

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 ▼

1355.43

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65359

Amount of Each Receipt this Period

73.79

SUBTOTAL of Receipts This Page (optional)

221.37

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 64 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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City

State

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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 ▼

1429.22

Date of Receipt

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

Transaction ID: SA11AI.65516

Amount of Each Receipt this Period

73.79

B.

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 ▼

1503.01

Date of Receipt

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

Transaction ID: SA11AI.65674

Amount of Each Receipt this Period

73.79

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 ▼

1576.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65830

Amount of Each Receipt this Period

73.79

SUBTOTAL of Receipts This Page (optional)

221.37

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 65 / 305

(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)

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 ▼

1650.59

Date of Receipt

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

Transaction ID: SA11AI.66024

Amount of Each Receipt this Period

73.79

B.

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 ▼

1724.38

Date of Receipt

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

Transaction ID: SA11AI.66186

Amount of Each Receipt this Period

73.79

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 ▼

1798.17

Date of Receipt

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

Transaction ID: SA11AI.66358

Amount of Each Receipt this Period

73.79

SUBTOTAL of Receipts This Page (optional)

221.37

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 66 / 305

(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)

Tracy Euliss

Mailing Address 5315 Middleton Rd

City

Durham

State

NC

Zip Code

27713

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.54

Date of Receipt

M M / D D / Y Y Y Y
07 / 07 / 2007

Transaction ID: SA11AI.64410

Amount of Each Receipt this Period

12.98

B.

Full Name (Last, First, Middle Initial)

Tracy Euliss

Mailing Address 5315 Middleton Rd

City

Durham

State

NC

Zip Code

27713

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.52

Date of Receipt

M M / D D / Y Y Y Y
07 / 20 / 2007

Transaction ID: SA11AI.64570

Amount of Each Receipt this Period

12.98

C.

Full Name (Last, First, Middle Initial)

M Robert Fleming

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

686.91

Date of Receipt

M M / D D / Y Y Y Y
07 / 07 / 2007

Transaction ID: SA11AI.64411

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

70.96

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 67 / 305

(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)

M Robert Fleming

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

731.91

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64571

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

M Robert Fleming

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

776.91

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64729

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

M Robert Fleming

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

821.91

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64886

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 68 / 305

(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)

M Robert Fleming

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

866.91

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65045

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

M Robert Fleming

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

911.91

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65201

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

M Robert Fleming

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

956.91

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65360

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 69 / 305

(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)

M Robert Fleming

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1006.38

Date of Receipt

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

Transaction ID: SA11AI.65517

Amount of Each Receipt this Period

49.47

B.

Full Name (Last, First, Middle Initial)

M Robert Fleming

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1055.85

Date of Receipt

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

Transaction ID: SA11AI.65675

Amount of Each Receipt this Period

49.47

C.

Full Name (Last, First, Middle Initial)

M Robert Fleming

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1105.32

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65831

Amount of Each Receipt this Period

49.47

SUBTOTAL of Receipts This Page (optional)

148.41

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 70 / 305

(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 Robert Fleming

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1154.79

Date of Receipt

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

Transaction ID: SA11AI.66025

Amount of Each Receipt this Period

49.47

B.

Full Name (Last, First, Middle Initial)

M Robert Fleming

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1204.26

Date of Receipt

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

Transaction ID: SA11AI.66187

Amount of Each Receipt this Period

49.47

C.

Full Name (Last, First, Middle Initial)

M Robert Fleming

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1253.73

Date of Receipt

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

Transaction ID: SA11AI.66359

Amount of Each Receipt this Period

49.47

SUBTOTAL of Receipts This Page (optional)

148.41

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 71 / 305

(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)

John Friesen

Mailing Address 50009 Brogden

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 ▼

1348.09

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64412

Amount of Each Receipt this Period

101.91

B.

Full Name (Last, First, Middle Initial)

John Friesen

Mailing Address 50009 Brogden

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 ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64572

Amount of Each Receipt this Period

101.91

C.

Full Name (Last, First, Middle Initial)

John Friesen

Mailing Address 50009 Brogden

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 ▼

1551.91

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64730

Amount of Each Receipt this Period

101.91

SUBTOTAL of Receipts This Page (optional)

305.73

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 72 / 305

(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)

John Friesen

Mailing Address 50009 Brogden

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 ▼

1653.82

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64887

Amount of Each Receipt this Period

101.91

B.

Full Name (Last, First, Middle Initial)

John Friesen

Mailing Address 50009 Brogden

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 ▼

1755.73

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65046

Amount of Each Receipt this Period

101.91

C.

Full Name (Last, First, Middle Initial)

John Friesen

Mailing Address 50009 Brogden

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 ▼

1857.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65202

Amount of Each Receipt this Period

101.91

SUBTOTAL of Receipts This Page (optional)

305.73

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 73 / 305

(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)

John Friesen

Mailing Address 50009 Brogden

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 ▼

1959.55

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65361

Amount of Each Receipt this Period

101.91

B.

Full Name (Last, First, Middle Initial)

John Friesen

Mailing Address 50009 Brogden

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 ▼

2061.46

Date of Receipt

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

Transaction ID: SA11AI.65518

Amount of Each Receipt this Period

101.91

C.

Full Name (Last, First, Middle Initial)

John Friesen

Mailing Address 50009 Brogden

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 ▼

2163.37

Date of Receipt

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

Transaction ID: SA11AI.65676

Amount of Each Receipt this Period

101.91

SUBTOTAL of Receipts This Page (optional)

305.73

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 74 / 305

(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)

John Friesen

Mailing Address 50009 Brogden

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 ▼

2265.28

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65832

Amount of Each Receipt this Period

101.91

B.

Full Name (Last, First, Middle Initial)

John Friesen

Mailing Address 50009 Brogden

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 ▼

2367.19

Date of Receipt

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

Transaction ID: SA11AI.66026

Amount of Each Receipt this Period

101.91

C.

Full Name (Last, First, Middle Initial)

John Friesen

Mailing Address 50009 Brogden

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 ▼

2469.10

Date of Receipt

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

Transaction ID: SA11AI.66188

Amount of Each Receipt this Period

101.91

SUBTOTAL of Receipts This Page (optional)

305.73

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 75 / 305

(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)

John Friesen

Mailing Address 50009 Brogden

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 ▼

2571.01

Date of Receipt

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

Transaction ID: SA11AI.66360

Amount of Each Receipt this Period

101.91

B.

Full Name (Last, First, Middle Initial)

Celia Fuller

Mailing Address 6114 Westglen Dr

City

Raleigh

State

NC

Zip Code

27612

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.23

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64413

Amount of Each Receipt this Period

39.06

C.

Full Name (Last, First, Middle Initial)

Celia Fuller

Mailing Address 6114 Westglen Dr

City

Raleigh

State

NC

Zip Code

27612

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

584.29

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64573

Amount of Each Receipt this Period

39.06

SUBTOTAL of Receipts This Page (optional)

180.03

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 76 / 305

(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)

Celia Fuller

Mailing Address 6114 Westglen Dr

City

Raleigh

State

NC

Zip Code

27612

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	0	7

Transaction ID: SA11AI.64731

Amount of Each Receipt this Period

39.06

B.

Full Name (Last, First, Middle Initial)

Celia Fuller

Mailing Address 6114 Westglen Dr

City

Raleigh

State

NC

Zip Code

27612

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.41

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	0	7

Transaction ID: SA11AI.64888

Amount of Each Receipt this Period

39.06

C.

Full Name (Last, First, Middle Initial)

Celia Fuller

Mailing Address 6114 Westglen Dr

City

Raleigh

State

NC

Zip Code

27612

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

701.47

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	7

Transaction ID: SA11AI.65047

Amount of Each Receipt this Period

39.06

SUBTOTAL of Receipts This Page (optional)

117.18

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 77 / 305

(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)

Celia Fuller

Mailing Address 6114 Westglen Dr

City

Raleigh

State

NC

Zip Code

27612

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.53

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65203

Amount of Each Receipt this Period

39.06

B.

Full Name (Last, First, Middle Initial)

Celia Fuller

Mailing Address 6114 Westglen Dr

City

Raleigh

State

NC

Zip Code

27612

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

779.59

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65362

Amount of Each Receipt this Period

39.06

C.

Full Name (Last, First, Middle Initial)

Celia Fuller

Mailing Address 6114 Westglen Dr

City

Raleigh

State

NC

Zip Code

27612

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

818.65

Date of Receipt

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

Transaction ID: SA11AI.65519

Amount of Each Receipt this Period

39.06

SUBTOTAL of Receipts This Page (optional)

117.18

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 78 / 305

(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)

Celia Fuller

Mailing Address 6114 Westglen Dr

City

Raleigh

State

NC

Zip Code

27612

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource/Technical Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

857.71

Date of Receipt

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

Transaction ID: SA11AI.65677

Amount of Each Receipt this Period

39.06

B.

Full Name (Last, First, Middle Initial)

Celia Fuller

Mailing Address 6114 Westglen Dr

City

Raleigh

State

NC

Zip Code

27612

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource/Technical Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

896.77

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65833

Amount of Each Receipt this Period

39.06

C.

Full Name (Last, First, Middle Initial)

Celia Fuller

Mailing Address 6114 Westglen Dr

City

Raleigh

State

NC

Zip Code

27612

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource/Technical Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

935.83

Date of Receipt

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

Transaction ID: SA11AI.66027

Amount of Each Receipt this Period

39.06

SUBTOTAL of Receipts This Page (optional)

117.18

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 79 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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A.

Full Name (Last, First, Middle Initial)

Celia Fuller

Mailing Address 6114 Westglen Dr

City

Raleigh

State

NC

Zip Code

27612

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

974.89

Date of Receipt

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

Transaction ID: SA11AI.66189

Amount of Each Receipt this Period

39.06

B.

Full Name (Last, First, Middle Initial)

Celia Fuller

Mailing Address 6114 Westglen Dr

City

Raleigh

State

NC

Zip Code

27612

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1013.95

Date of Receipt

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

Transaction ID: SA11AI.66361

Amount of Each Receipt this Period

39.06

C.

Full Name (Last, First, Middle Initial)

Kathi Gaines

Mailing Address 603 Kingswood Drive

City

Cary

State

NC

Zip Code

27513

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 ▼

555.71

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64414

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

123.12

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 80 / 305

(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)

Kathi Gaines

Mailing Address 603 Kingswood Drive

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64574

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

Kathi Gaines

Mailing Address 603 Kingswood Drive

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

645.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64732

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

Kathi Gaines

Mailing Address 603 Kingswood Drive

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

690.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64889

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 81 / 305

(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)

Kathi Gaines

Mailing Address 603 Kingswood Drive

City

State

Zip Code

Cary

NC

27513

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 ▼

735.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65048

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

Kathi Gaines

Mailing Address 603 Kingswood Drive

City

State

Zip Code

Cary

NC

27513

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 ▼

780.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65204

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

Kathi Gaines

Mailing Address 603 Kingswood Drive

City

State

Zip Code

Cary

NC

27513

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 ▼

825.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65363

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 82 / 305

(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)

Kathi Gaines

Mailing Address 603 Kingswood Drive

City

State

Zip Code

Cary

NC

27513

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 ▼

870.71

Date of Receipt

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

Transaction ID: SA11AI.65520

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

Kathi Gaines

Mailing Address 603 Kingswood Drive

City

State

Zip Code

Cary

NC

27513

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 ▼

915.71

Date of Receipt

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

Transaction ID: SA11AI.65678

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

Kathi Gaines

Mailing Address 603 Kingswood Drive

City

State

Zip Code

Cary

NC

27513

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 ▼

960.71

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65834

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 83 / 305

(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)

Kathi Gaines

Mailing Address 603 Kingswood Drive

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1005.71

Date of Receipt

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

Transaction ID: SA11AI.66028

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

Kathi Gaines

Mailing Address 603 Kingswood Drive

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1050.71

Date of Receipt

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

Transaction ID: SA11AI.66190

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

Kathi Gaines

Mailing Address 603 Kingswood Drive

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1103.79

Date of Receipt

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

Transaction ID: SA11AI.66362

Amount of Each Receipt this Period

53.08

SUBTOTAL of Receipts This Page (optional)

143.08

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 84 / 305

(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)

Lynne Garrison

Mailing Address 806 Green Passage Lane

City

State

Zip Code

Apex

NC

27502

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

861.69

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64416

Amount of Each Receipt this Period

67.08

B.

Full Name (Last, First, Middle Initial)

Lynne Garrison

Mailing Address 806 Green Passage Lane

City

State

Zip Code

Apex

NC

27502

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

928.77

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64576

Amount of Each Receipt this Period

67.08

C.

Full Name (Last, First, Middle Initial)

Lynne Garrison

Mailing Address 806 Green Passage Lane

City

State

Zip Code

Apex

NC

27502

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

995.85

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64734

Amount of Each Receipt this Period

67.08

SUBTOTAL of Receipts This Page (optional)

201.24

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 85 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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A.

Full Name (Last, First, Middle Initial)

Lynne Garrison

Mailing Address 806 Green Passage Lane

City

State

Zip Code

Apex

NC

27502

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 ▼

1062.93

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64891

Amount of Each Receipt this Period

67.08

B.

Full Name (Last, First, Middle Initial)

Lynne Garrison

Mailing Address 806 Green Passage Lane

City

State

Zip Code

Apex

NC

27502

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 ▼

1130.01

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65050

Amount of Each Receipt this Period

67.08

C.

Full Name (Last, First, Middle Initial)

Lynne Garrison

Mailing Address 806 Green Passage Lane

City

State

Zip Code

Apex

NC

27502

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 ▼

1197.09

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65206

Amount of Each Receipt this Period

67.08

SUBTOTAL of Receipts This Page (optional)

201.24

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 86 / 305

(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)

Lynne Garrison

Mailing Address 806 Green Passage Lane

City

State

Zip Code

Apex

NC

27502

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 ▼

1264.17

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65365

Amount of Each Receipt this Period

67.08

B.

Full Name (Last, First, Middle Initial)

Lynne Garrison

Mailing Address 806 Green Passage Lane

City

State

Zip Code

Apex

NC

27502

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 ▼

1331.25

Date of Receipt

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

Transaction ID: SA11AI.65522

Amount of Each Receipt this Period

67.08

C.

Full Name (Last, First, Middle Initial)

Lynne Garrison

Mailing Address 806 Green Passage Lane

City

State

Zip Code

Apex

NC

27502

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 ▼

1398.33

Date of Receipt

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

Transaction ID: SA11AI.65680

Amount of Each Receipt this Period

67.08

SUBTOTAL of Receipts This Page (optional)

201.24

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 87 / 305

(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)

Lynne Garrison

Mailing Address 806 Green Passage Lane

City State Zip Code

Apex NC 27502

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 ▼

1465.41

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65836

Amount of Each Receipt this Period

67.08

B.

Full Name (Last, First, Middle Initial)

Lynne Garrison

Mailing Address 806 Green Passage Lane

City State Zip Code

Apex NC 27502

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 ▼

1532.49

Date of Receipt

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

Transaction ID: SA11AI.66030

Amount of Each Receipt this Period

67.08

C.

Full Name (Last, First, Middle Initial)

Lynne Garrison

Mailing Address 806 Green Passage Lane

City State Zip Code

Apex NC 27502

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 ▼

1599.57

Date of Receipt

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

Transaction ID: SA11AI.66192

Amount of Each Receipt this Period

67.08

SUBTOTAL of Receipts This Page (optional)

201.24

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 88 / 305

(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)

Lynne Garrison

Mailing Address 806 Green Passage Lane

City State Zip Code
 Apex NC 27502

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 ▼

1666.65

Date of Receipt

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

Transaction ID: SA11AI.66364

Amount of Each Receipt this Period

67.08

B.

Full Name (Last, First, Middle Initial)

Martin Gase

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.30

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64417

Amount of Each Receipt this Period

1.00

C.

Full Name (Last, First, Middle Initial)

Martin Gase

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.30

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64577

Amount of Each Receipt this Period

1.00

SUBTOTAL of Receipts This Page (optional)

69.08

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 89 / 305

(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)

Martin Gase

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.30

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64735

Amount of Each Receipt this Period

1.00

B.

Full Name (Last, First, Middle Initial)

Martin Gase

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.30

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64892

Amount of Each Receipt this Period

1.00

C.

Full Name (Last, First, Middle Initial)

Martin Gase

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.30

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65051

Amount of Each Receipt this Period

1.00

SUBTOTAL of Receipts This Page (optional)

3.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 90 / 305

(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)

Martin Gase

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.30

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65207

Amount of Each Receipt this Period

1.00

B.

Full Name (Last, First, Middle Initial)

Martin Gase

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.30

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65366

Amount of Each Receipt this Period

1.00

C.

Full Name (Last, First, Middle Initial)

Martin Gase

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.30

Date of Receipt

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

Transaction ID: SA11AI.65523

Amount of Each Receipt this Period

1.00

SUBTOTAL of Receipts This Page (optional)

3.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 / 305

(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)

Martin Gase

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.30

Date of Receipt

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

Transaction ID: SA11AI.65681

Amount of Each Receipt this Period

1.00

B.

Full Name (Last, First, Middle Initial)

Martin Gase

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	7

Transaction ID: SA11AI.65837

Amount of Each Receipt this Period

1.00

C.

Full Name (Last, First, Middle Initial)

Martin Gase

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.30

Date of Receipt

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

Transaction ID: SA11AI.66031

Amount of Each Receipt this Period

1.00

SUBTOTAL of Receipts This Page (optional)

3.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 92 / 305

(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)

Martin Gase

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.30

Date of Receipt

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

Transaction ID: SA11AI.66193

Amount of Each Receipt this Period

1.00

B.

Full Name (Last, First, Middle Initial)

Martin Gase

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.30

Date of Receipt

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

Transaction ID: SA11AI.66365

Amount of Each Receipt this Period

1.00

C.

Full Name (Last, First, Middle Initial)

Daniel Glaser

Mailing Address 3613 Hathaway Road

City

State

Zip Code

Durham

NC

27707

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 ▼

2483.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64418

Amount of Each Receipt this Period

192.30

SUBTOTAL of Receipts This Page (optional)

194.30

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 93 / 305

(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)

Daniel Glaser

Mailing Address 3613 Hathaway Road

City

Durham

State

NC

Zip Code

27707

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 ▼

2675.30

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64578

Amount of Each Receipt this Period

192.30

B.

Full Name (Last, First, Middle Initial)

Daniel Glaser

Mailing Address 3613 Hathaway Road

City

Durham

State

NC

Zip Code

27707

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 ▼

2867.60

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64736

Amount of Each Receipt this Period

192.30

C.

Full Name (Last, First, Middle Initial)

Daniel Glaser

Mailing Address 3613 Hathaway Road

City

Durham

State

NC

Zip Code

27707

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 ▼

3059.90

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64893

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: PAGE 94 / 305

(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)

Daniel Glaser

Mailing Address 3613 Hathaway Road

City

Durham

State

NC

Zip Code

27707

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3252.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.65052

Amount of Each Receipt this Period

192.30

B.

Full Name (Last, First, Middle Initial)

Daniel Glaser

Mailing Address 3613 Hathaway Road

City

Durham

State

NC

Zip Code

27707

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3444.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	7

Transaction ID: SA11AI.65208

Amount of Each Receipt this Period

192.30

C.

Full Name (Last, First, Middle Initial)

Daniel Glaser

Mailing Address 3613 Hathaway Road

City

Durham

State

NC

Zip Code

27707

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3636.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	8	/	2	0	0	7

Transaction ID: SA11AI.65367

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: PAGE 95 / 305

(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)

Daniel Glaser

Mailing Address 3613 Hathaway Road

City

Durham

State

NC

Zip Code

27707

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 ▼

3829.10

Date of Receipt

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

Transaction ID: SA11AI.65524

Amount of Each Receipt this Period

192.30

B.

Full Name (Last, First, Middle Initial)

Daniel Glaser

Mailing Address 3613 Hathaway Road

City

Durham

State

NC

Zip Code

27707

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 ▼

4021.40

Date of Receipt

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

Transaction ID: SA11AI.65682

Amount of Each Receipt this Period

192.30

C.

Full Name (Last, First, Middle Initial)

Daniel Glaser

Mailing Address 3613 Hathaway Road

City

Durham

State

NC

Zip Code

27707

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 ▼

4213.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65838

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: PAGE 96 / 305

(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)

Daniel Glaser

Mailing Address 3613 Hathaway Road

City

Durham

State

NC

Zip Code

27707

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 ▼

4406.00

Date of Receipt

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

Transaction ID: SA11AI.66032

Amount of Each Receipt this Period

192.30

B.

Full Name (Last, First, Middle Initial)

Daniel Glaser

Mailing Address 3613 Hathaway Road

City

Durham

State

NC

Zip Code

27707

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 ▼

4598.30

Date of Receipt

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

Transaction ID: SA11AI.66196

Amount of Each Receipt this Period

192.30

C.

Full Name (Last, First, Middle Initial)

Daniel Glaser

Mailing Address 3613 Hathaway Road

City

Durham

State

NC

Zip Code

27707

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 ▼

4790.60

Date of Receipt

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

Transaction ID: SA11AI.66367

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: PAGE 97 / 305

(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)

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
BCBSNC

Occupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.08

Date of Receipt

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

Transaction ID: SA11AI.66369

Amount of Each Receipt this Period

111.54

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 ▼

584.25

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64420

Amount of Each Receipt this Period

30.85

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
BCBSNC

Occupation
Regional Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.10

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64580

Amount of Each Receipt this Period

30.85

SUBTOTAL of Receipts This Page (optional)

173.24

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 98 / 305

(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)

Laura Gorry

Mailing Address 2566 Ironwood Drive

City

Hickory

State

NC

Zip Code

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 ▼

645.95

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64738

Amount of Each Receipt this Period

30.85

B.

Full Name (Last, First, Middle Initial)

Laura Gorry

Mailing Address 2566 Ironwood Drive

City

Hickory

State

NC

Zip Code

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 ▼

676.80

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64895

Amount of Each Receipt this Period

30.85

C.

Full Name (Last, First, Middle Initial)

Laura Gorry

Mailing Address 2566 Ironwood Drive

City

Hickory

State

NC

Zip Code

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 ▼

707.65

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65054

Amount of Each Receipt this Period

30.85

SUBTOTAL of Receipts This Page (optional)

92.55

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 99 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

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Full Name (Last, First, Middle Initial)

Laura Gorry

Mailing Address 2566 Ironwood Drive

City

Hickory

State

NC

Zip Code

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 ▼

738.50

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65210

Amount of Each Receipt this Period

30.85

B.

Full Name (Last, First, Middle Initial)

Laura Gorry

Mailing Address 2566 Ironwood Drive

City

Hickory

State

NC

Zip Code

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 ▼

769.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65369

Amount of Each Receipt this Period

30.85

C.

Full Name (Last, First, Middle Initial)

Laura Gorry

Mailing Address 2566 Ironwood Drive

City

Hickory

State

NC

Zip Code

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 ▼

800.20

Date of Receipt

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

Transaction ID: SA11AI.65526

Amount of Each Receipt this Period

30.85

SUBTOTAL of Receipts This Page (optional)

92.55

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 100 / 305

(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)

Laura Gorry

Mailing Address 2566 Ironwood Drive

City

Hickory

State

NC

Zip Code

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 ▼

831.05

Date of Receipt

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

Transaction ID: SA11AI.65684

Amount of Each Receipt this Period

30.85

B.

Full Name (Last, First, Middle Initial)

Laura Gorry

Mailing Address 2566 Ironwood Drive

City

Hickory

State

NC

Zip Code

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 ▼

861.90

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65840

Amount of Each Receipt this Period

30.85

C.

Full Name (Last, First, Middle Initial)

Laura Gorry

Mailing Address 2566 Ironwood Drive

City

Hickory

State

NC

Zip Code

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 ▼

892.75

Date of Receipt

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

Transaction ID: SA11AI.66034

Amount of Each Receipt this Period

30.85

SUBTOTAL of Receipts This Page (optional)

92.55

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 101 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name (Last, First, Middle Initial)

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Mailing Address 2566 Ironwood Drive

City

Hickory

State

NC

Zip Code

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 ▼

923.60

Date of Receipt

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

Transaction ID: SA11AI.66200

Amount of Each Receipt this Period

30.85

B.

Full Name (Last, First, Middle Initial)

Laura Gorry

Mailing Address 2566 Ironwood Drive

City

Hickory

State

NC

Zip Code

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 ▼

954.45

Date of Receipt

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

Transaction ID: SA11AI.66370

Amount of Each Receipt this Period

30.85

C.

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 ▼

2513.46

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64421

Amount of Each Receipt this Period

192.30

SUBTOTAL of Receipts This Page (optional)

254.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 102 / 305

(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 ▼

2705.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	0	/	2	0	0	7

Transaction ID: SA11AI.64581

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 ▼

2898.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	0	7

Transaction ID: SA11AI.64739

Amount of Each Receipt this Period

192.30

C.

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 ▼

3090.36

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	7	/	2	0	0	7

Transaction ID: SA11AI.64896

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: PAGE 103 / 305

(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)

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 ▼

3282.66

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65055

Amount of Each Receipt this Period

192.30

B.

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 ▼

3474.96

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65211

Amount of Each Receipt this Period

192.30

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 ▼

3667.26

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65370

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: PAGE 104 / 305

(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)

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 ▼

3859.56

Date of Receipt

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

Transaction ID: SA11AI.65527

Amount of Each Receipt this Period

192.30

B.

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 ▼

4051.86

Date of Receipt

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

Transaction ID: SA11AI.65685

Amount of Each Receipt this Period

192.30

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 ▼

4244.16

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65841

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: PAGE 105 / 305

(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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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 ▼

4436.46

Date of Receipt

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

Transaction ID: SA11AI.66035

Amount of Each Receipt this Period

192.30

B.

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 ▼

4628.76

Date of Receipt

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

Transaction ID: SA11AI.66201

Amount of Each Receipt this Period

192.30

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 ▼

4821.06

Date of Receipt

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

Transaction ID: SA11AI.66371

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: PAGE 106 / 305
(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)

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 ▼

207.10

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64422

Amount of Each Receipt this Period

13.56

B.

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 ▼

220.66

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64582

Amount of Each Receipt this Period

13.56

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 ▼

234.22

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64740

Amount of Each Receipt this Period

13.56

SUBTOTAL of Receipts This Page (optional)

40.68

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 107 / 305

(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)

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 ▼

247.78

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64897

Amount of Each Receipt this Period

13.56

B.

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 ▼

261.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65056

Amount of Each Receipt this Period

13.56

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 ▼

274.90

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65212

Amount of Each Receipt this Period

13.56

SUBTOTAL of Receipts This Page (optional)

40.68

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 108 / 305

(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. 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 ▼

288.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	8	/	2	0	0	7

Transaction ID: SA11AI.65371

Amount of Each Receipt this Period

13.56

B.

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 ▼

302.02

Date of Receipt

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

Transaction ID: SA11AI.65528

Amount of Each Receipt this Period

13.56

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 ▼

315.58

Date of Receipt

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

Transaction ID: SA11AI.65686

Amount of Each Receipt this Period

13.56

SUBTOTAL of Receipts This Page (optional)

40.68

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 109 / 305

(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)

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 ▼

329.14

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65842

Amount of Each Receipt this Period

13.56

B.

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 ▼

342.70

Date of Receipt

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

Transaction ID: SA11AI.66036

Amount of Each Receipt this Period

13.56

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 ▼

356.26

Date of Receipt

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

Transaction ID: SA11AI.66202

Amount of Each Receipt this Period

13.56

SUBTOTAL of Receipts This Page (optional)

40.68

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 110 / 305

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A.

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 ▼

369.82

Date of Receipt

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

Transaction ID: SA11AI.66372

Amount of Each Receipt this Period

13.56

B.

Full Name (Last, First, Middle Initial)

Danny Gunselman

Mailing Address 3018 Annandale Road

City

Durham

State

NC

Zip Code

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 ▼

396.46

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64423

Amount of Each Receipt this Period

30.82

C.

Full Name (Last, First, Middle Initial)

Danny Gunselman

Mailing Address 3018 Annandale Road

City

Durham

State

NC

Zip Code

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 ▼

427.28

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64583

Amount of Each Receipt this Period

30.82

SUBTOTAL of Receipts This Page (optional)

75.20

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 111 / 305

(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)

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 ▼

458.10

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64741

Amount of Each Receipt this Period

30.82

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 ▼

488.92

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64898

Amount of Each Receipt this Period

30.82

C.

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 ▼

519.74

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65057

Amount of Each Receipt this Period

30.82

SUBTOTAL of Receipts This Page (optional)

92.46

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: PAGE 112 / 305

(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)

Danny Gunselman

Mailing Address 3018 Annandale Road

City

Durham

State

NC

Zip Code

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 ▼

550.56

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65213

Amount of Each Receipt this Period

30.82

B.

Full Name (Last, First, Middle Initial)

Danny Gunselman

Mailing Address 3018 Annandale Road

City

Durham

State

NC

Zip Code

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 ▼

581.38

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65372

Amount of Each Receipt this Period

30.82

C.

Full Name (Last, First, Middle Initial)

Danny Gunselman

Mailing Address 3018 Annandale Road

City

Durham

State

NC

Zip Code

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 ▼

612.20

Date of Receipt

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

Transaction ID: SA11AI.65529

Amount of Each Receipt this Period

30.82

SUBTOTAL of Receipts This Page (optional)

92.46

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: PAGE 113 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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

Durham

State

NC

Zip Code

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 ▼

643.02

Date of Receipt

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

Transaction ID: SA11AI.65687

Amount of Each Receipt this Period

30.82

B.

Full Name (Last, First, Middle Initial)

Danny Gunselman

Mailing Address 3018 Annandale Road

City

Durham

State

NC

Zip Code

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 ▼

673.84

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65843

Amount of Each Receipt this Period

30.82

C.

Full Name (Last, First, Middle Initial)

Danny Gunselman

Mailing Address 3018 Annandale Road

City

Durham

State

NC

Zip Code

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 ▼

704.66

Date of Receipt

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

Transaction ID: SA11AI.66037

Amount of Each Receipt this Period

30.82

SUBTOTAL of Receipts This Page (optional)

92.46

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: PAGE 114 / 305

(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)

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 ▼

735.48

Date of Receipt

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

Transaction ID: SA11AI.66203

Amount of Each Receipt this Period

30.82

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 ▼

766.30

Date of Receipt

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

Transaction ID: SA11AI.66373

Amount of Each Receipt this Period

30.82

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 ▼

202.58

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64900

Amount of Each Receipt this Period

12.73

SUBTOTAL of Receipts This Page (optional)

74.37

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 115 / 305

(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)

Charles Harvey

Mailing Address 426 Holly Springs Dr

City

Timberlake

State

NC

Zip Code

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 ▼

215.31

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65059

Amount of Each Receipt this Period

12.73

B.

Full Name (Last, First, Middle Initial)

Charles Harvey

Mailing Address 426 Holly Springs Dr

City

Timberlake

State

NC

Zip Code

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 ▼

228.04

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65215

Amount of Each Receipt this Period

12.73

C.

Full Name (Last, First, Middle Initial)

Charles Harvey

Mailing Address 426 Holly Springs Dr

City

Timberlake

State

NC

Zip Code

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 ▼

240.77

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65374

Amount of Each Receipt this Period

12.73

SUBTOTAL of Receipts This Page (optional)

38.19

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 116 / 305

(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)

Charles Harvey

Mailing Address 426 Holly Springs Dr

City

Timberlake

State

NC

Zip Code

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 ▼

253.50

Date of Receipt

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

Transaction ID: SA11AI.65531

Amount of Each Receipt this Period

12.73

B.

Full Name (Last, First, Middle Initial)

Charles Harvey

Mailing Address 426 Holly Springs Dr

City

Timberlake

State

NC

Zip Code

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 ▼

266.23

Date of Receipt

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

Transaction ID: SA11AI.65689

Amount of Each Receipt this Period

12.73

C.

Full Name (Last, First, Middle Initial)

Charles Harvey

Mailing Address 426 Holly Springs Dr

City

Timberlake

State

NC

Zip Code

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 ▼

278.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	7

Transaction ID: SA11AI.65845

Amount of Each Receipt this Period

12.73

SUBTOTAL of Receipts This Page (optional)

38.19

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 117 / 305

(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)

Charles Harvey

Mailing Address 426 Holly Springs Dr

City

Timberlake

State

NC

Zip Code

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 ▼

291.69

Date of Receipt

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

Transaction ID: SA11AI.66039

Amount of Each Receipt this Period

12.73

B.

Full Name (Last, First, Middle Initial)

Charles Harvey

Mailing Address 426 Holly Springs Dr

City

Timberlake

State

NC

Zip Code

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 ▼

304.42

Date of Receipt

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

Transaction ID: SA11AI.66205

Amount of Each Receipt this Period

12.73

C.

Full Name (Last, First, Middle Initial)

Charles Harvey

Mailing Address 426 Holly Springs Dr

City

Timberlake

State

NC

Zip Code

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 ▼

317.15

Date of Receipt

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

Transaction ID: SA11AI.66375

Amount of Each Receipt this Period

12.73

SUBTOTAL of Receipts This Page (optional)

38.19

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 118 / 305

(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)

Patricia Hatfield

Mailing Address 102 Oak Spring Court

City

Carrboro

State

NC

Zip Code

27510

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Assoc. General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

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

Transaction ID: SA11AI.65533

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Patricia Hatfield

Mailing Address 102 Oak Spring Court

City

Carrboro

State

NC

Zip Code

27510

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Assoc. General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

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

Transaction ID: SA11AI.65691

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Patricia Hatfield

Mailing Address 102 Oak Spring Court

City

Carrboro

State

NC

Zip Code

27510

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Assoc. General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65847

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 119 / 305

(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)

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
BCBSNC

Occupation
Assoc. General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

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

Transaction ID: SA11AI.66041

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
BCBSNC

Occupation
Assoc. General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

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

Transaction ID: SA11AI.66207

Amount of Each Receipt this Period

10.00

C.

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
BCBSNC

Occupation
Assoc. General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

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

Transaction ID: SA11AI.66377

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 120 / 305

(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)

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
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.20

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64429

Amount of Each Receipt this Period

19.17

B.

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
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.37

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64589

Amount of Each Receipt this Period

19.17

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
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.54

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64747

Amount of Each Receipt this Period

19.17

SUBTOTAL of Receipts This Page (optional)

57.51

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 121 / 305

(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)

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
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64904

Amount of Each Receipt this Period

19.17

B.

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
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.88

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65063

Amount of Each Receipt this Period

19.17

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
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.05

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65219

Amount of Each Receipt this Period

19.17

SUBTOTAL of Receipts This Page (optional)

57.51

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 122 / 305

(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)

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
BCBSNCOccupation
Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	8	/	2	0	0	7

Transaction ID: SA11AI.65378

Amount of Each Receipt this Period

19.17

B.

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
BCBSNCOccupation
Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

419.39

Date of Receipt

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

Transaction ID: SA11AI.65535

Amount of Each Receipt this Period

19.17

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
BCBSNCOccupation
Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

438.56

Date of Receipt

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

Transaction ID: SA11AI.65693

Amount of Each Receipt this Period

19.17

SUBTOTAL of Receipts This Page (optional)

57.51

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 123 / 305

(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)

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
BCBSNCOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.73

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	7

Transaction ID: SA11AI.65849

Amount of Each Receipt this Period

19.17

B.

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
BCBSNCOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.90

Date of Receipt

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

Transaction ID: SA11AI.66043

Amount of Each Receipt this Period

19.17

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
BCBSNCOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.07

Date of Receipt

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

Transaction ID: SA11AI.66209

Amount of Each Receipt this Period

19.17

SUBTOTAL of Receipts This Page (optional)

57.51

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 124 / 305

(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)

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
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.24

Date of Receipt

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

Transaction ID: SA11AI.66379

Amount of Each Receipt this Period

19.17

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 ▼

511.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64430

Amount of Each Receipt this Period

39.69

C.

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 ▼

551.02

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64590

Amount of Each Receipt this Period

39.69

SUBTOTAL of Receipts This Page (optional)

98.55

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 125 / 305

(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)

Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City

Chapel Hill

State

NC

Zip Code

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 ▼

590.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64748

Amount of Each Receipt this Period

39.69

B.

Full Name (Last, First, Middle Initial)

Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City

Chapel Hill

State

NC

Zip Code

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 ▼

630.40

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64905

Amount of Each Receipt this Period

39.69

C.

Full Name (Last, First, Middle Initial)

Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City

Chapel Hill

State

NC

Zip Code

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 ▼

670.09

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65064

Amount of Each Receipt this Period

39.69

SUBTOTAL of Receipts This Page (optional)

119.07

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: PAGE 126 / 305

(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)

Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City

Chapel Hill

State

NC

Zip Code

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 ▼

709.78

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65220

Amount of Each Receipt this Period

39.69

B.

Full Name (Last, First, Middle Initial)

Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City

Chapel Hill

State

NC

Zip Code

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 ▼

757.75

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65379

Amount of Each Receipt this Period

47.97

C.

Full Name (Last, First, Middle Initial)

Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City

Chapel Hill

State

NC

Zip Code

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 ▼

798.71

Date of Receipt

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

Transaction ID: SA11AI.65536

Amount of Each Receipt this Period

40.96

SUBTOTAL of Receipts This Page (optional)

128.62

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: PAGE 127 / 305

(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)

Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City

Chapel Hill

State

NC

Zip Code

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 ▼

839.67

Date of Receipt

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

Transaction ID: SA11AI.65694

Amount of Each Receipt this Period

40.96

B.

Full Name (Last, First, Middle Initial)

Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City

Chapel Hill

State

NC

Zip Code

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 ▼

880.63

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65850

Amount of Each Receipt this Period

40.96

C.

Full Name (Last, First, Middle Initial)

Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City

Chapel Hill

State

NC

Zip Code

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 ▼

921.59

Date of Receipt

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

Transaction ID: SA11AI.66044

Amount of Each Receipt this Period

40.96

SUBTOTAL of Receipts This Page (optional)

122.88

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 128 / 305

(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 Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City

Chapel Hill

State

NC

Zip Code

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 ▼

962.55

Date of Receipt

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

Transaction ID: SA11AI.66210

Amount of Each Receipt this Period

40.96

B.

Full Name (Last, First, Middle Initial)

Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City

Chapel Hill

State

NC

Zip Code

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 ▼

1003.51

Date of Receipt

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

Transaction ID: SA11AI.66380

Amount of Each Receipt this Period

40.96

C.

Full Name (Last, First, Middle Initial)

Steven Hicks

Mailing Address 7512 Tylerton Dr

City

Raleigh

State

NC

Zip Code

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 ▼

202.00

Date of Receipt

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

Transaction ID: SA11AI.65539

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

91.92

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 129 / 305

(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)

Steven Hicks

Mailing Address 7512 Tylerton Dr

City

Raleigh

State

NC

Zip Code

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 ▼

212.00

Date of Receipt

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

Transaction ID: SA11AI.65697

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Steven Hicks

Mailing Address 7512 Tylerton Dr

City

Raleigh

State

NC

Zip Code

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 ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65853

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Steven Hicks

Mailing Address 7512 Tylerton Dr

City

Raleigh

State

NC

Zip Code

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 ▼

232.00

Date of Receipt

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

Transaction ID: SA11AI.66047

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 130 / 305

(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)

Steven Hicks

Mailing Address 7512 Tylerton Dr

City

Raleigh

State

NC

Zip Code

27613

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

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

Transaction ID: SA11AI.66213

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Steven Hicks

Mailing Address 7512 Tylerton Dr

City

Raleigh

State

NC

Zip Code

27613

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

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

Transaction ID: SA11AI.66383

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Vernelle Jones

Mailing Address 404 Lindsay St

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.99

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	7	/	2	0	0	7

Transaction ID: SA11AI.64441

Amount of Each Receipt this Period

19.23

SUBTOTAL of Receipts This Page (optional)

39.23

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 131 / 305

(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)

Vernelle Jones

Mailing Address 404 Lindsay St

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.22

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64601

Amount of Each Receipt this Period

19.23

B.

Full Name (Last, First, Middle Initial)

Vernelle Jones

Mailing Address 404 Lindsay St

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.45

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64758

Amount of Each Receipt this Period

19.23

C.

Full Name (Last, First, Middle Initial)

Vernelle Jones

Mailing Address 404 Lindsay St

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.68

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64916

Amount of Each Receipt this Period

19.23

SUBTOTAL of Receipts This Page (optional)

57.69

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 132 / 305

(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)

Vernelle Jones

Mailing Address 404 Lindsay St

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.91

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65074

Amount of Each Receipt this Period

19.23

B.

Full Name (Last, First, Middle Initial)

Vernelle Jones

Mailing Address 404 Lindsay St

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.14

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65231

Amount of Each Receipt this Period

19.23

C.

Full Name (Last, First, Middle Initial)

Vernelle Jones

Mailing Address 404 Lindsay St

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.37

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65390

Amount of Each Receipt this Period

19.23

SUBTOTAL of Receipts This Page (optional)

57.69

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 133 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A.

Full Name (Last, First, Middle Initial)

Vernelle Jones

Mailing Address 404 Lindsay St

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.60

Date of Receipt

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

Transaction ID: SA11AI.65547

Amount of Each Receipt this Period

19.23

B.

Full Name (Last, First, Middle Initial)

Vernelle Jones

Mailing Address 404 Lindsay St

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.83

Date of Receipt

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

Transaction ID: SA11AI.65705

Amount of Each Receipt this Period

19.23

C.

Full Name (Last, First, Middle Initial)

Vernelle Jones

Mailing Address 404 Lindsay St

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.06

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65861

Amount of Each Receipt this Period

19.23

SUBTOTAL of Receipts This Page (optional)

57.69

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 134 / 305
(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)

Vernelle Jones

Mailing Address 404 Lindsay St

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.29

Date of Receipt

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

Transaction ID: SA11AI.66054

Amount of Each Receipt this Period

19.23

B.

Full Name (Last, First, Middle Initial)

Vernelle Jones

Mailing Address 404 Lindsay St

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.52

Date of Receipt

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

Transaction ID: SA11AI.66223

Amount of Each Receipt this Period

19.23

C.

Full Name (Last, First, Middle Initial)

Vernelle Jones

Mailing Address 404 Lindsay St

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.75

Date of Receipt

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

Transaction ID: SA11AI.66391

Amount of Each Receipt this Period

19.23

SUBTOTAL of Receipts This Page (optional)

57.69

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 135 / 305

(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)

Melissa Kempf

Mailing Address 372 Winter Green Road

City

Timberlake

State

NC

Zip Code

27583

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.35

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64918

Amount of Each Receipt this Period

7.75

B.

Full Name (Last, First, Middle Initial)

Melissa Kempf

Mailing Address 372 Winter Green Road

City

Timberlake

State

NC

Zip Code

27583

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.10

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65076

Amount of Each Receipt this Period

7.75

C.

Full Name (Last, First, Middle Initial)

Melissa Kempf

Mailing Address 372 Winter Green Road

City

Timberlake

State

NC

Zip Code

27583

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.85

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65233

Amount of Each Receipt this Period

7.75

SUBTOTAL of Receipts This Page (optional)

23.25

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 136 / 305

(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)

Melissa Kempf

Mailing Address 372 Winter Green Road

City

Timberlake

State

NC

Zip Code

27583

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	8	/	2	0	0	7

Transaction ID: SA11AI.65392

Amount of Each Receipt this Period

7.75

B.

Full Name (Last, First, Middle Initial)

Melissa Kempf

Mailing Address 372 Winter Green Road

City

Timberlake

State

NC

Zip Code

27583

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.35

Date of Receipt

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

Transaction ID: SA11AI.65549

Amount of Each Receipt this Period

7.75

C.

Full Name (Last, First, Middle Initial)

Melissa Kempf

Mailing Address 372 Winter Green Road

City

Timberlake

State

NC

Zip Code

27583

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.10

Date of Receipt

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

Transaction ID: SA11AI.65707

Amount of Each Receipt this Period

7.75

SUBTOTAL of Receipts This Page (optional)

23.25

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

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(check only one)

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☐ 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)

Melissa Kempf

Mailing Address 372 Winter Green Road

City

Timberlake

State

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Zip Code

27583

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.85

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65863

Amount of Each Receipt this Period

7.75

B.

Full Name (Last, First, Middle Initial)

Melissa Kempf

Mailing Address 372 Winter Green Road

City

Timberlake

State

NC

Zip Code

27583

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.60

Date of Receipt

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

Transaction ID: SA11AI.66056

Amount of Each Receipt this Period

7.75

C.

Full Name (Last, First, Middle Initial)

Melissa Kempf

Mailing Address 372 Winter Green Road

City

Timberlake

State

NC

Zip Code

27583

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.35

Date of Receipt

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

Transaction ID: SA11AI.66225

Amount of Each Receipt this Period

7.75

SUBTOTAL of Receipts This Page (optional)

23.25

TOTAL This Period (last page this line number only)

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

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C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.10

Date of Receipt

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

Transaction ID: SA11AI.66393

Amount of Each Receipt this Period

7.75

B.

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 ▼

1040.99

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64444

Amount of Each Receipt this Period

80.50

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 ▼

1121.49

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64604

Amount of Each Receipt this Period

80.50

SUBTOTAL of Receipts This Page (optional)

168.75

TOTAL This Period (last page this line number only)

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

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Full Name (Last, First, Middle Initial)

Mr. James Kenley, Sr.

Mailing Address 4670 Elmhurst Drive NE

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Hickory

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NC

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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 ▼

1201.99

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64761

Amount of Each Receipt this Period

80.50

B.

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 ▼

1282.49

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64919

Amount of Each Receipt this Period

80.50

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 ▼

1362.99

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65077

Amount of Each Receipt this Period

80.50

SUBTOTAL of Receipts This Page (optional)

241.50

TOTAL This Period (last page this line number only)

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

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Mr. James Kenley, Sr.

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28601

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C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1443.49

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65234

Amount of Each Receipt this Period

80.50

B.

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 ▼

1523.99

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65393

Amount of Each Receipt this Period

80.50

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 ▼

1604.49

Date of Receipt

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

Transaction ID: SA11AI.65550

Amount of Each Receipt this Period

80.50

SUBTOTAL of Receipts This Page (optional)

241.50

TOTAL This Period (last page this line number only)

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

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28601

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1684.99

Date of Receipt

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

Transaction ID: SA11AI.65708

Amount of Each Receipt this Period

80.50

B.

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 ▼

1765.49

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65864

Amount of Each Receipt this Period

80.50

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 ▼

1845.99

Date of Receipt

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

Transaction ID: SA11AI.66057

Amount of Each Receipt this Period

80.50

SUBTOTAL of Receipts This Page (optional)

241.50

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. James Kenley, Sr.

Mailing Address 4670 Elmhurst Drive NE

City State Zip Code
Hickory NC 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 ▼

1926.49

Date of Receipt

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

Transaction ID: SA11AI.66226

Amount of Each Receipt this Period

80.50

B.

Full Name (Last, First, Middle Initial)

Mr. James Kenley, Sr.

Mailing Address 4670 Elmhurst Drive NE

City State Zip Code
Hickory NC 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 ▼

2006.99

Date of Receipt

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

Transaction ID: SA11AI.66394

Amount of Each Receipt this Period

80.50

C.

Full Name (Last, First, Middle Initial)

Sean Kerns

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

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

Transaction ID: SA11AI.66058

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

171.00

TOTAL This Period (last page this line number only)

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

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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)

Sean Kerns

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

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

Transaction ID: SA11AI.66227

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Sean Kerns

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

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

Transaction ID: SA11AI.66395

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

E George Lassiter

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1021.20

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64447

Amount of Each Receipt this Period

78.85

SUBTOTAL of Receipts This Page (optional)

98.85

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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A.

Full Name (Last, First, Middle Initial)

E George Lassiter

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.05

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64607

Amount of Each Receipt this Period

78.85

B.

Full Name (Last, First, Middle Initial)

E George Lassiter

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1178.90

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64764

Amount of Each Receipt this Period

78.85

C.

Full Name (Last, First, Middle Initial)

E George Lassiter

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1257.75

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64922

Amount of Each Receipt this Period

78.85

SUBTOTAL of Receipts This Page (optional)

236.55

TOTAL This Period (last page this line number only)

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

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

A.

Full Name (Last, First, Middle Initial)

E George Lassiter

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1336.60

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65080

Amount of Each Receipt this Period

78.85

B.

Full Name (Last, First, Middle Initial)

E George Lassiter

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1415.45

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65237

Amount of Each Receipt this Period

78.85

C.

Full Name (Last, First, Middle Initial)

E George Lassiter

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1494.30

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65396

Amount of Each Receipt this Period

78.85

SUBTOTAL of Receipts This Page (optional)

236.55

TOTAL This Period (last page this line number only)

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

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Detailed Summary Page

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A.

Full Name (Last, First, Middle Initial)

E George Lassiter

Mailing Address

City

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federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1573.15

Date of Receipt

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

Transaction ID: SA11AI.65553

Amount of Each Receipt this Period

78.85

B.

Full Name (Last, First, Middle Initial)

E George Lassiter

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1652.00

Date of Receipt

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

Transaction ID: SA11AI.65711

Amount of Each Receipt this Period

78.85

C.

Full Name (Last, First, Middle Initial)

E George Lassiter

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1730.85

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65867

Amount of Each Receipt this Period

78.85

SUBTOTAL of Receipts This Page (optional)

236.55

TOTAL This Period (last page this line number only)

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

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FOR LINE NUMBER: PAGE 147 / 305

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A.

Full Name (Last, First, Middle Initial)

E George Lassiter

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1809.70

Date of Receipt

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

Transaction ID: SA11AI.66060

Amount of Each Receipt this Period

78.85

B.

Full Name (Last, First, Middle Initial)

E George Lassiter

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1888.55

Date of Receipt

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

Transaction ID: SA11AI.66231

Amount of Each Receipt this Period

78.85

C.

Full Name (Last, First, Middle Initial)

E George Lassiter

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1967.40

Date of Receipt

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

Transaction ID: SA11AI.66398

Amount of Each Receipt this Period

78.85

SUBTOTAL of Receipts This Page (optional)

236.55

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 148 / 305

(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)

Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 07 / 2007

Transaction ID: SA11AI.64448

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 20 / 2007

Transaction ID: SA11AI.64608

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 03 / 2007

Transaction ID: SA11AI.64765

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 149 / 305

(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)

Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64923

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65081

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65238

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 150 / 305

(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)

Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65397

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

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

Transaction ID: SA11AI.65554

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

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

Transaction ID: SA11AI.65712

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 151 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name (Last, First, Middle Initial)

Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65868

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

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

Transaction ID: SA11AI.66061

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

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

Transaction ID: SA11AI.66232

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 152 / 305

(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)

Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

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

Transaction ID: SA11AI.66399

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Debra MacClennan

Mailing Address 400 Lakeshore Lane

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 ▼

1017.79

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64451

Amount of Each Receipt this Period

76.94

C.

Full Name (Last, First, Middle Initial)

Debra MacClennan

Mailing Address 400 Lakeshore Lane

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 ▼

1094.73

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64610

Amount of Each Receipt this Period

76.94

SUBTOTAL of Receipts This Page (optional)

178.88

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 153 / 305

(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)

Debra MacClennan

Mailing Address 400 Lakeshore Lane

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 ▼

1171.67

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64767

Amount of Each Receipt this Period

76.94

B.

Full Name (Last, First, Middle Initial)

Debra MacClennan

Mailing Address 400 Lakeshore Lane

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 ▼

1248.61

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64925

Amount of Each Receipt this Period

76.94

C.

Full Name (Last, First, Middle Initial)

Debra MacClennan

Mailing Address 400 Lakeshore Lane

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 ▼

1325.55

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65083

Amount of Each Receipt this Period

76.94

SUBTOTAL of Receipts This Page (optional)

230.82

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 154 / 305

(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)

Debra MacClennan

Mailing Address 400 Lakeshore Lane

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 ▼

1402.49

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65240

Amount of Each Receipt this Period

76.94

B.

Full Name (Last, First, Middle Initial)

Debra MacClennan

Mailing Address 400 Lakeshore Lane

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 ▼

1479.43

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65399

Amount of Each Receipt this Period

76.94

C.

Full Name (Last, First, Middle Initial)

Debra MacClennan

Mailing Address 400 Lakeshore Lane

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 ▼

1556.37

Date of Receipt

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

Transaction ID: SA11AI.65556

Amount of Each Receipt this Period

76.94

SUBTOTAL of Receipts This Page (optional)

230.82

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 155 / 305

(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)

Debra MacClennan

Mailing Address 400 Lakeshore Lane

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 ▼

1633.31

Date of Receipt

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

Transaction ID: SA11AI.65714

Amount of Each Receipt this Period

76.94

B.

Full Name (Last, First, Middle Initial)

Debra MacClennan

Mailing Address 400 Lakeshore Lane

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 ▼

1710.25

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65870

Amount of Each Receipt this Period

76.94

C.

Full Name (Last, First, Middle Initial)

Debra MacClennan

Mailing Address 400 Lakeshore Lane

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 ▼

1787.19

Date of Receipt

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

Transaction ID: SA11AI.66063

Amount of Each Receipt this Period

76.94

SUBTOTAL of Receipts This Page (optional)

230.82

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 156 / 305

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

A.

Full Name (Last, First, Middle Initial)

Debra MacClennan

Mailing Address 400 Lakeshore Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1864.13

Date of Receipt

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

Transaction ID: SA11AI.66234

Amount of Each Receipt this Period

76.94

B.

Full Name (Last, First, Middle Initial)

Debra MacClennan

Mailing Address 400 Lakeshore Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1941.07

Date of Receipt

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

Transaction ID: SA11AI.66401

Amount of Each Receipt this Period

76.94

C.

Full Name (Last, First, Middle Initial)

Laurie Mace

Mailing Address 105 Dutchess Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.81

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	7	/	2	0	0	7

Transaction ID: SA11AI.64452

Amount of Each Receipt this Period

17.57

SUBTOTAL of Receipts This Page (optional)

171.45

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 157 / 305

(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)

Laurie Mace

Mailing Address 105 Dutchess Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.38

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64611

Amount of Each Receipt this Period

17.57

B.

Full Name (Last, First, Middle Initial)

Laurie Mace

Mailing Address 105 Dutchess Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.95

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64768

Amount of Each Receipt this Period

17.57

C.

Full Name (Last, First, Middle Initial)

Laurie Mace

Mailing Address 105 Dutchess Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.52

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64926

Amount of Each Receipt this Period

17.57

SUBTOTAL of Receipts This Page (optional)

52.71

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 158 / 305

(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)

Laurie Mace

Mailing Address 105 Dutchess Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.09

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65084

Amount of Each Receipt this Period

17.57

B.

Full Name (Last, First, Middle Initial)

Laurie Mace

Mailing Address 105 Dutchess Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.66

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65241

Amount of Each Receipt this Period

17.57

C.

Full Name (Last, First, Middle Initial)

Laurie Mace

Mailing Address 105 Dutchess Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.23

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65400

Amount of Each Receipt this Period

17.57

SUBTOTAL of Receipts This Page (optional)

52.71

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 159 / 305

(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)

Laurie Mace

Mailing Address 105 Dutchess Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.23

Date of Receipt

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

Transaction ID: SA11AI.65557

Amount of Each Receipt this Period

0.00

B.

Full Name (Last, First, Middle Initial)

Laurie Mace

Mailing Address 105 Dutchess Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65871

Amount of Each Receipt this Period

21.08

C.

Full Name (Last, First, Middle Initial)

Laurie Mace

Mailing Address 105 Dutchess Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.37

Date of Receipt

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

Transaction ID: SA11AI.66064

Amount of Each Receipt this Period

17.57

SUBTOTAL of Receipts This Page (optional)

38.65

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 160 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.94

Date of Receipt

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

Transaction ID: SA11AI.66235

Amount of Each Receipt this Period

17.57

B.

Full Name (Last, First, Middle Initial)

Laurie Mace

Mailing Address 105 Dutchess Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.51

Date of Receipt

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

Transaction ID: SA11AI.66402

Amount of Each Receipt this Period

17.57

C.

Full Name (Last, First, Middle Initial)

Joe McDowell

Mailing Address 165 Farmington Road

City

Grimesland

State

NC

Zip Code

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64454

Amount of Each Receipt this Period

16.00

SUBTOTAL of Receipts This Page (optional)

51.14

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 161 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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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

Grimesland

State

NC

Zip Code

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 ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64613

Amount of Each Receipt this Period

16.00

B.

Full Name (Last, First, Middle Initial)

Joe McDowell

Mailing Address 165 Farmington Road

City

Grimesland

State

NC

Zip Code

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 ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64770

Amount of Each Receipt this Period

16.00

C.

Full Name (Last, First, Middle Initial)

Joe McDowell

Mailing Address 165 Farmington Road

City

Grimesland

State

NC

Zip Code

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 ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64928

Amount of Each Receipt this Period

16.00

SUBTOTAL of Receipts This Page (optional)

48.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 162 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A.

Full Name (Last, First, Middle Initial)

Joe McDowell

Mailing Address 165 Farmington Road

City

Grimesland

State

NC

Zip Code

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 ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65086

Amount of Each Receipt this Period

16.00

B.

Full Name (Last, First, Middle Initial)

Joe McDowell

Mailing Address 165 Farmington Road

City

Grimesland

State

NC

Zip Code

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 ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65243

Amount of Each Receipt this Period

16.00

C.

Full Name (Last, First, Middle Initial)

Joe McDowell

Mailing Address 165 Farmington Road

City

Grimesland

State

NC

Zip Code

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 ▼

306.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65402

Amount of Each Receipt this Period

16.00

SUBTOTAL of Receipts This Page (optional)

48.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 163 / 305

(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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A.

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Joe McDowell

Mailing Address 165 Farmington Road

City

Grimesland

State

NC

Zip Code

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 ▼

322.00

Date of Receipt

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

Transaction ID: SA11AI.65559

Amount of Each Receipt this Period

16.00

B.

Full Name (Last, First, Middle Initial)

Joe McDowell

Mailing Address 165 Farmington Road

City

Grimesland

State

NC

Zip Code

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 ▼

338.00

Date of Receipt

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

Transaction ID: SA11AI.65716

Amount of Each Receipt this Period

16.00

C.

Full Name (Last, First, Middle Initial)

Joe McDowell

Mailing Address 165 Farmington Road

City

Grimesland

State

NC

Zip Code

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 ▼

354.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	7

Transaction ID: SA11AI.65873

Amount of Each Receipt this Period

16.00

SUBTOTAL of Receipts This Page (optional)

48.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 164 / 305

(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)

Joe McDowell

Mailing Address 165 Farmington Road

City

Grimesland

State

NC

Zip Code

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 ▼

370.00

Date of Receipt

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

Transaction ID: SA11AI.66066

Amount of Each Receipt this Period

16.00

B.

Full Name (Last, First, Middle Initial)

Joe McDowell

Mailing Address 165 Farmington Road

City

Grimesland

State

NC

Zip Code

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 ▼

386.00

Date of Receipt

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

Transaction ID: SA11AI.66237

Amount of Each Receipt this Period

16.00

C.

Full Name (Last, First, Middle Initial)

Joe McDowell

Mailing Address 165 Farmington Road

City

Grimesland

State

NC

Zip Code

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 ▼

402.00

Date of Receipt

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

Transaction ID: SA11AI.66404

Amount of Each Receipt this Period

16.00

SUBTOTAL of Receipts This Page (optional)

48.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 165 / 305

(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

Mailing Address 185 Swansea Lane

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1113.66

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	0	7

Transaction ID: SA11AI.64457

Amount of Each Receipt this Period

87.72

B.

Full Name (Last, First, Middle Initial)

Lynn McNeal

Mailing Address 185 Swansea Lane

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1201.38

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	0	7

Transaction ID: SA11AI.64616

Amount of Each Receipt this Period

87.72

C.

Full Name (Last, First, Middle Initial)

Lynn McNeal

Mailing Address 185 Swansea Lane

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1328.57

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	0	7

Transaction ID: SA11AI.64773

Amount of Each Receipt this Period

127.19

SUBTOTAL of Receipts This Page (optional)

302.63

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 166 / 305

(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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A.

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Lynn McNeal

Mailing Address 185 Swansea Lane

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1422.87

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	0	7

Transaction ID: SA11AI.64931

Amount of Each Receipt this Period

94.30

B.

Full Name (Last, First, Middle Initial)

Lynn McNeal

Mailing Address 185 Swansea Lane

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1517.17

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	7

Transaction ID: SA11AI.65089

Amount of Each Receipt this Period

94.30

C.

Full Name (Last, First, Middle Initial)

Lynn McNeal

Mailing Address 185 Swansea Lane

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1611.47

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	0	7

Transaction ID: SA11AI.65246

Amount of Each Receipt this Period

94.30

SUBTOTAL of Receipts This Page (optional)

282.90

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: PAGE 167 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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City

Chapel Hill

State

NC

Zip Code

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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 ▼

1705.77

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65405

Amount of Each Receipt this Period

94.30

B.

Full Name (Last, First, Middle Initial)

Lynn McNeal

Mailing Address 185 Swansea Lane

City

Chapel Hill

State

NC

Zip Code

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 ▼

1800.07

Date of Receipt

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

Transaction ID: SA11AI.65562

Amount of Each Receipt this Period

94.30

C.

Full Name (Last, First, Middle Initial)

Lynn McNeal

Mailing Address 185 Swansea Lane

City

Chapel Hill

State

NC

Zip Code

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 ▼

1894.37

Date of Receipt

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

Transaction ID: SA11AI.65719

Amount of Each Receipt this Period

94.30

SUBTOTAL of Receipts This Page (optional)

282.90

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: PAGE 168 / 305

(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

Mailing Address 185 Swansea Lane

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1988.67

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	7

Transaction ID: SA11AI.65876

Amount of Each Receipt this Period

94.30

B.

Full Name (Last, First, Middle Initial)

Lynn McNeal

Mailing Address 185 Swansea Lane

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2082.97

Date of Receipt

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

Transaction ID: SA11AI.66069

Amount of Each Receipt this Period

94.30

C.

Full Name (Last, First, Middle Initial)

Lynn McNeal

Mailing Address 185 Swansea Lane

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2177.27

Date of Receipt

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

Transaction ID: SA11AI.66240

Amount of Each Receipt this Period

94.30

SUBTOTAL of Receipts This Page (optional)

282.90

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: PAGE 169 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A.

Full Name (Last, First, Middle Initial)

Lynn McNeal

Mailing Address 185 Swansea Lane

City

Chapel Hill

State

NC

Zip Code

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 ▼

2271.57

Date of Receipt

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

Transaction ID: SA11AI.66407

Amount of Each Receipt this Period

94.30

B.

Full Name (Last, First, Middle Initial)

Shirley Michl

Mailing Address 105 Songbird Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Sr. OD Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.57

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64459

Amount of Each Receipt this Period

18.13

C.

Full Name (Last, First, Middle Initial)

Shirley Michl

Mailing Address 105 Songbird Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Sr. OD Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64618

Amount of Each Receipt this Period

18.13

SUBTOTAL of Receipts This Page (optional)

130.56

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 170 / 305

(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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Shirley Michl

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NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Sr. OD Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.83

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	0	7

Transaction ID: SA11AI.64775

Amount of Each Receipt this Period

18.13

B.

Full Name (Last, First, Middle Initial)

Shirley Michl

Mailing Address 105 Songbird Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Sr. OD Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	0	7

Transaction ID: SA11AI.64933

Amount of Each Receipt this Period

18.13

C.

Full Name (Last, First, Middle Initial)

Shirley Michl

Mailing Address 105 Songbird Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Sr. OD Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.09

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	7

Transaction ID: SA11AI.65091

Amount of Each Receipt this Period

18.13

SUBTOTAL of Receipts This Page (optional)

54.39

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 171 / 305

(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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A.

Full Name (Last, First, Middle Initial)

Shirley Michl

Mailing Address 105 Songbird Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Sr. OD Consultant

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

342.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	0	7

Transaction ID: SA11AI.65248

Amount of Each Receipt this Period

18.13

B.

Full Name (Last, First, Middle Initial)

Shirley Michl

Mailing Address 105 Songbird Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Sr. OD Consultant

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

360.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	0	7

Transaction ID: SA11AI.65407

Amount of Each Receipt this Period

18.13

C.

Full Name (Last, First, Middle Initial)

Shirley Michl

Mailing Address 105 Songbird Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Sr. OD Consultant

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

378.48

Date of Receipt

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

Transaction ID: SA11AI.65564

Amount of Each Receipt this Period

18.13

SUBTOTAL of Receipts This Page (optional)

54.39

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 172 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Mailing Address 105 Songbird Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Sr. OD Consultant

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.61

Date of Receipt

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

Transaction ID: SA11AI.65721

Amount of Each Receipt this Period

18.13

B.

Full Name (Last, First, Middle Initial)

Shirley Michl

Mailing Address 105 Songbird Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Sr. OD Consultant

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.74

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65878

Amount of Each Receipt this Period

18.13

C.

Full Name (Last, First, Middle Initial)

Shirley Michl

Mailing Address 105 Songbird Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Sr. OD Consultant

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.87

Date of Receipt

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

Transaction ID: SA11AI.66071

Amount of Each Receipt this Period

18.13

SUBTOTAL of Receipts This Page (optional)

54.39

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 173 / 305

(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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Full Name (Last, First, Middle Initial)

Shirley Michl

Mailing Address 105 Songbird Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Sr. OD Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.00

Date of Receipt

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

Transaction ID: SA11AI.66242

Amount of Each Receipt this Period

18.13

B.

Full Name (Last, First, Middle Initial)

Shirley Michl

Mailing Address 105 Songbird Lane

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Sr. OD Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

469.13

Date of Receipt

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

Transaction ID: SA11AI.66409

Amount of Each Receipt this Period

18.13

C.

Full Name (Last, First, Middle Initial)

Kathryn Millican

Mailing Address 1632 Lorraine Road

City

Raleigh

State

NC

Zip Code

27607

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.03

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	7	/	2	0	0	7

Transaction ID: SA11AI.64460

Amount of Each Receipt this Period

18.22

SUBTOTAL of Receipts This Page (optional)

54.48

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 174 / 305

(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)

Kathryn Millican

Mailing Address 1632 Lorraine Road

City

Raleigh

State

NC

Zip Code

27607

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.25

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64619

Amount of Each Receipt this Period

18.22

B.

Full Name (Last, First, Middle Initial)

Kathryn Millican

Mailing Address 1632 Lorraine Road

City

Raleigh

State

NC

Zip Code

27607

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.47

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64776

Amount of Each Receipt this Period

18.22

C.

Full Name (Last, First, Middle Initial)

Kathryn Millican

Mailing Address 1632 Lorraine Road

City

Raleigh

State

NC

Zip Code

27607

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.69

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64934

Amount of Each Receipt this Period

18.22

SUBTOTAL of Receipts This Page (optional)

54.66

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 175 / 305

(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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Full Name (Last, First, Middle Initial)

Kathryn Millican

Mailing Address 1632 Lorraine Road

City

Raleigh

State

NC

Zip Code

27607

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.91

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	7

Transaction ID: SA11AI.65092

Amount of Each Receipt this Period

18.22

B.

Full Name (Last, First, Middle Initial)

Kathryn Millican

Mailing Address 1632 Lorraine Road

City

Raleigh

State

NC

Zip Code

27607

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.13

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	0	7

Transaction ID: SA11AI.65249

Amount of Each Receipt this Period

18.22

C.

Full Name (Last, First, Middle Initial)

Kathryn Millican

Mailing Address 1632 Lorraine Road

City

Raleigh

State

NC

Zip Code

27607

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	0	7

Transaction ID: SA11AI.65408

Amount of Each Receipt this Period

18.22

SUBTOTAL of Receipts This Page (optional)

54.66

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 176 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Kathryn Millican

Mailing Address 1632 Lorraine Road

City

Raleigh

State

NC

Zip Code

27607

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.57

Date of Receipt

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

Transaction ID: SA11AI.65565

Amount of Each Receipt this Period

18.22

B.

Full Name (Last, First, Middle Initial)

Kathryn Millican

Mailing Address 1632 Lorraine Road

City

Raleigh

State

NC

Zip Code

27607

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.79

Date of Receipt

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

Transaction ID: SA11AI.65722

Amount of Each Receipt this Period

18.22

C.

Full Name (Last, First, Middle Initial)

Kathryn Millican

Mailing Address 1632 Lorraine Road

City

Raleigh

State

NC

Zip Code

27607

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.01

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65879

Amount of Each Receipt this Period

18.22

SUBTOTAL of Receipts This Page (optional)

54.66

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 177 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Mailing Address 1632 Lorraine Road

City

Raleigh

State

NC

Zip Code

27607

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

434.23

Date of Receipt

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

Transaction ID: SA11AI.66072

Amount of Each Receipt this Period

18.22

B.

Full Name (Last, First, Middle Initial)

Kathryn Millican

Mailing Address 1632 Lorraine Road

City

Raleigh

State

NC

Zip Code

27607

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.45

Date of Receipt

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

Transaction ID: SA11AI.66243

Amount of Each Receipt this Period

18.22

C.

Full Name (Last, First, Middle Initial)

Kathryn Millican

Mailing Address 1632 Lorraine Road

City

Raleigh

State

NC

Zip Code

27607

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.67

Date of Receipt

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

Transaction ID: SA11AI.66410

Amount of Each Receipt this Period

18.22

SUBTOTAL of Receipts This Page (optional)

54.66

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 178 / 305

(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)

Ms Linda Norwood

Mailing Address 1131 Fleming Road

City

Creedmoor

State

NC

Zip Code

27522

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.77

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65096

Amount of Each Receipt this Period

11.69

B.

Full Name (Last, First, Middle Initial)

Ms Linda Norwood

Mailing Address 1131 Fleming Road

City

Creedmoor

State

NC

Zip Code

27522

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65253

Amount of Each Receipt this Period

11.69

C.

Full Name (Last, First, Middle Initial)

Ms Linda Norwood

Mailing Address 1131 Fleming Road

City

Creedmoor

State

NC

Zip Code

27522

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.15

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65412

Amount of Each Receipt this Period

11.69

SUBTOTAL of Receipts This Page (optional)

35.07

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: PAGE 179 / 305

(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)

Ms Linda Norwood

Mailing Address 1131 Fleming Road

City

Creedmoor

State

NC

Zip Code

27522

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.84

Date of Receipt

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

Transaction ID: SA11AI.65569

Amount of Each Receipt this Period

11.69

B.

Full Name (Last, First, Middle Initial)

Ms Linda Norwood

Mailing Address 1131 Fleming Road

City

Creedmoor

State

NC

Zip Code

27522

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.53

Date of Receipt

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

Transaction ID: SA11AI.65726

Amount of Each Receipt this Period

11.69

C.

Full Name (Last, First, Middle Initial)

Ms Linda Norwood

Mailing Address 1131 Fleming Road

City

Creedmoor

State

NC

Zip Code

27522

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.22

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65883

Amount of Each Receipt this Period

11.69

SUBTOTAL of Receipts This Page (optional)

35.07

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: PAGE 180 / 305

(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)

Ms Linda Norwood

Mailing Address 1131 Fleming Road

City

Creedmoor

State

NC

Zip Code

27522

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.91

Date of Receipt

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

Transaction ID: SA11AI.66076

Amount of Each Receipt this Period

11.69

B.

Full Name (Last, First, Middle Initial)

Ms Linda Norwood

Mailing Address 1131 Fleming Road

City

Creedmoor

State

NC

Zip Code

27522

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.60

Date of Receipt

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

Transaction ID: SA11AI.66247

Amount of Each Receipt this Period

11.69

C.

Full Name (Last, First, Middle Initial)

Ms Linda Norwood

Mailing Address 1131 Fleming Road

City

Creedmoor

State

NC

Zip Code

27522

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.29

Date of Receipt

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

Transaction ID: SA11AI.66414

Amount of Each Receipt this Period

11.69

SUBTOTAL of Receipts This Page (optional)

35.07

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: PAGE 181 / 305

(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)

Maureen OConnor

Mailing Address 104 Beeston Ct.

City

Morrisville

State

NC

Zip Code

27560

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2078.26

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	0	7

Transaction ID: SA11AI.64466

Amount of Each Receipt this Period

150.79

B.

Full Name (Last, First, Middle Initial)

Maureen OConnor

Mailing Address 104 Beeston Ct.

City

Morrisville

State

NC

Zip Code

27560

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2229.05

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	0	7

Transaction ID: SA11AI.64625

Amount of Each Receipt this Period

150.79

C.

Full Name (Last, First, Middle Initial)

Maureen OConnor

Mailing Address 104 Beeston Ct.

City

Morrisville

State

NC

Zip Code

27560

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2379.84

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	0	7

Transaction ID: SA11AI.64782

Amount of Each Receipt this Period

150.79

SUBTOTAL of Receipts This Page (optional)

452.37

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 182 / 305

(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)

Maureen OConnor

Mailing Address 104 Beeston Ct.

City

Morrisville

State

NC

Zip Code

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 ▼

2530.63

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64940

Amount of Each Receipt this Period

150.79

B.

Full Name (Last, First, Middle Initial)

Maureen OConnor

Mailing Address 104 Beeston Ct.

City

Morrisville

State

NC

Zip Code

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 ▼

2681.42

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65098

Amount of Each Receipt this Period

150.79

C.

Full Name (Last, First, Middle Initial)

Maureen OConnor

Mailing Address 104 Beeston Ct.

City

Morrisville

State

NC

Zip Code

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 ▼

2873.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65255

Amount of Each Receipt this Period

192.30

SUBTOTAL of Receipts This Page (optional)

493.88

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 183 / 305

(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)

Maureen OConnor

Mailing Address 104 Beeston Ct.

City

Morrisville

State

NC

Zip Code

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 ▼

3066.02

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65414

Amount of Each Receipt this Period

192.30

B.

Full Name (Last, First, Middle Initial)

Maureen OConnor

Mailing Address 104 Beeston Ct.

City

Morrisville

State

NC

Zip Code

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 ▼

3258.32

Date of Receipt

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

Transaction ID: SA11AI.65571

Amount of Each Receipt this Period

192.30

C.

Full Name (Last, First, Middle Initial)

Maureen OConnor

Mailing Address 104 Beeston Ct.

City

Morrisville

State

NC

Zip Code

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 ▼

3450.62

Date of Receipt

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

Transaction ID: SA11AI.65728

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: PAGE 184 / 305

(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)

Maureen OConnor

Mailing Address 104 Beeston Ct.

City

Morrisville

State

NC

Zip Code

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 ▼

3642.92

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65885

Amount of Each Receipt this Period

192.30

B.

Full Name (Last, First, Middle Initial)

Maureen OConnor

Mailing Address 104 Beeston Ct.

City

Morrisville

State

NC

Zip Code

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 ▼

3835.22

Date of Receipt

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

Transaction ID: SA11AI.66078

Amount of Each Receipt this Period

192.30

C.

Full Name (Last, First, Middle Initial)

Maureen OConnor

Mailing Address 104 Beeston Ct.

City

Morrisville

State

NC

Zip Code

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 ▼

4027.52

Date of Receipt

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

Transaction ID: SA11AI.66249

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: PAGE 185 / 305

(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)

Maureen OConnor

Mailing Address 104 Beeston Ct.

City

Morrisville

State

NC

Zip Code

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 ▼

4219.82

Date of Receipt

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

Transaction ID: SA11AI.66416

Amount of Each Receipt this Period

192.30

B.

Full Name (Last, First, Middle Initial)

James Owens

Mailing Address 12 Treadway Court

City

Hillsborough

State

NC

Zip Code

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 ▼

1114.18

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64468

Amount of Each Receipt this Period

80.42

C.

Full Name (Last, First, Middle Initial)

James Owens

Mailing Address 12 Treadway Court

City

Hillsborough

State

NC

Zip Code

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 ▼

1160.51

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64627

Amount of Each Receipt this Period

46.33

SUBTOTAL of Receipts This Page (optional)

319.05

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 186 / 305

(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)

James Owens

Mailing Address 12 Treadway Court

City

Hillsborough

State

NC

Zip Code

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 ▼

1218.20

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64784

Amount of Each Receipt this Period

57.69

B.

Full Name (Last, First, Middle Initial)

James Owens

Mailing Address 12 Treadway Court

City

Hillsborough

State

NC

Zip Code

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 ▼

1275.89

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64942

Amount of Each Receipt this Period

57.69

C.

Full Name (Last, First, Middle Initial)

James Owens

Mailing Address 12 Treadway Court

City

Hillsborough

State

NC

Zip Code

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 ▼

1333.58

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65100

Amount of Each Receipt this Period

57.69

SUBTOTAL of Receipts This Page (optional)

173.07

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: PAGE 187 / 305

(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)

James Owens

Mailing Address 12 Treadway Court

City

Hillsborough

State

NC

Zip Code

27278

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1391.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	0	7

Transaction ID: SA11AI.65257

Amount of Each Receipt this Period

57.69

B.

Full Name (Last, First, Middle Initial)

James Owens

Mailing Address 12 Treadway Court

City

Hillsborough

State

NC

Zip Code

27278

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1448.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	0	7

Transaction ID: SA11AI.65416

Amount of Each Receipt this Period

57.69

C.

Full Name (Last, First, Middle Initial)

James Owens

Mailing Address 12 Treadway Court

City

Hillsborough

State

NC

Zip Code

27278

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1506.65

Date of Receipt

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

Transaction ID: SA11AI.65573

Amount of Each Receipt this Period

57.69

SUBTOTAL of Receipts This Page (optional)

173.07

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 188 / 305

(check only one)

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☐ 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)

James Owens

Mailing Address 12 Treadway Court

City

Hillsborough

State

NC

Zip Code

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 ▼

1564.34

Date of Receipt

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

Transaction ID: SA11AI.65730

Amount of Each Receipt this Period

57.69

B.

Full Name (Last, First, Middle Initial)

James Owens

Mailing Address 12 Treadway Court

City

Hillsborough

State

NC

Zip Code

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 ▼

1622.03

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65887

Amount of Each Receipt this Period

57.69

C.

Full Name (Last, First, Middle Initial)

James Owens

Mailing Address 12 Treadway Court

City

Hillsborough

State

NC

Zip Code

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 ▼

1679.72

Date of Receipt

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

Transaction ID: SA11AI.66080

Amount of Each Receipt this Period

57.69

SUBTOTAL of Receipts This Page (optional)

173.07

TOTAL This Period (last page this line number only)

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

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27278

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1737.41

Date of Receipt

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

Transaction ID: SA11AI.66251

Amount of Each Receipt this Period

57.69

B.

Full Name (Last, First, Middle Initial)

James Owens

Mailing Address 12 Treadway Court

City

Hillsborough

State

NC

Zip Code

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 ▼

1795.10

Date of Receipt

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

Transaction ID: SA11AI.66418

Amount of Each Receipt this Period

57.69

C.

Full Name (Last, First, Middle Initial)

Fara Palumbo

Mailing Address 1000 Gloucester Ct

City

Chapel Hill

State

NC

Zip Code

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 ▼

747.93

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64470

Amount of Each Receipt this Period

54.00

SUBTOTAL of Receipts This Page (optional)

169.38

TOTAL This Period (last page this line number only)

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

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Detailed Summary Page

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State

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Zip Code

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 ▼

801.93

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64629

Amount of Each Receipt this Period

54.00

B.

Full Name (Last, First, Middle Initial)

Fara Palumbo

Mailing Address 1000 Gloucester Ct

City

Chapel Hill

State

NC

Zip Code

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 ▼

855.93

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64786

Amount of Each Receipt this Period

54.00

C.

Full Name (Last, First, Middle Initial)

Fara Palumbo

Mailing Address 1000 Gloucester Ct

City

Chapel Hill

State

NC

Zip Code

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 ▼

909.93

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64944

Amount of Each Receipt this Period

54.00

SUBTOTAL of Receipts This Page (optional)

162.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(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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State

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Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

963.93

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.65102

Amount of Each Receipt this Period

54.00

B.

Full Name (Last, First, Middle Initial)

Fara Palumbo

Mailing Address 1000 Gloucester Ct

City

Chapel Hill

State

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27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1017.93

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	7

Transaction ID: SA11AI.65259

Amount of Each Receipt this Period

54.00

C.

Full Name (Last, First, Middle Initial)

Fara Palumbo

Mailing Address 1000 Gloucester Ct

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1071.93

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	8	/	2	0	0	7

Transaction ID: SA11AI.65418

Amount of Each Receipt this Period

54.00

SUBTOTAL of Receipts This Page (optional)

162.00

TOTAL This Period (last page this line number only)

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

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C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.93

Date of Receipt

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

Transaction ID: SA11AI.65575

Amount of Each Receipt this Period

54.00

B.

Full Name (Last, First, Middle Initial)

Fara Palumbo

Mailing Address 1000 Gloucester Ct

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Chapel Hill

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C

Name of Employer
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Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1179.93

Date of Receipt

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

Transaction ID: SA11AI.65732

Amount of Each Receipt this Period

54.00

C.

Full Name (Last, First, Middle Initial)

Fara Palumbo

Mailing Address 1000 Gloucester Ct

City

Chapel Hill

State

NC

Zip Code

27516

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1233.93

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65889

Amount of Each Receipt this Period

54.00

SUBTOTAL of Receipts This Page (optional)

162.00

TOTAL This Period (last page this line number only)

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

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C

Name of Employer
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Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1287.93

Date of Receipt

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

Transaction ID: SA11AI.66082

Amount of Each Receipt this Period

54.00

B.

Full Name (Last, First, Middle Initial)

Fara Palumbo

Mailing Address 1000 Gloucester Ct

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Chapel Hill

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27516

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federal political committee.

C

Name of Employer
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Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1341.93

Date of Receipt

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

Transaction ID: SA11AI.66253

Amount of Each Receipt this Period

54.00

C.

Full Name (Last, First, Middle Initial)

Fara Palumbo

Mailing Address 1000 Gloucester Ct

City

Chapel Hill

State

NC

Zip Code

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 ▼

1395.93

Date of Receipt

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

Transaction ID: SA11AI.66420

Amount of Each Receipt this Period

54.00

SUBTOTAL of Receipts This Page (optional)

162.00

TOTAL This Period (last page this line number only)

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

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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

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64472

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

M David Patrick

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64631

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

M David Patrick

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64788

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)
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FOR LINE NUMBER: PAGE 195 / 305

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

A.

Full Name (Last, First, Middle Initial)

M David Patrick

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64946

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

M David Patrick

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65104

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

M David Patrick

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65261

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)
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FOR LINE NUMBER: PAGE 196 / 305
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

M David Patrick

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65420

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

M David Patrick

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

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

Transaction ID: SA11AI.65577

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

M David Patrick

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11AI.65734

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**

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FOR LINE NUMBER: PAGE 197 / 305

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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M David Patrick

Mailing Address

City

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Zip Code

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federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65891

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

M David Patrick

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

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

Transaction ID: SA11AI.66086

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

M David Patrick

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

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

Transaction ID: SA11AI.66256

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**

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Full Name (Last, First, Middle Initial)

M David Patrick

Mailing Address

City

State

Zip Code

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federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

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

Transaction ID: SA11AI.66423

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

M Silas Payne

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: SA11AI.65578

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

M Silas Payne

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

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 6 / 2 0 0 7

Transaction ID: SA11AI.65735

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 199 / 305

(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)

M Silas Payne

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

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 9 / 2 0 0 7

Transaction ID: SA11AI.65892

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

M Silas Payne

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

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 7

Transaction ID: SA11AI.66087

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

M Silas Payne

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.66257

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 200 / 305

(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)

M Silas Payne

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: SA11AI.66424

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Marianella Perdomo

Mailing Address 1835 Adare Drive

City

State

Zip Code

Clemmons

NC

27012

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 ▼

210.00

Date of Receipt

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

Transaction ID: SA11AI.65579

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Marianella Perdomo

Mailing Address 1835 Adare Drive

City

State

Zip Code

Clemmons

NC

27012

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 6 / 2 0 0 7

Transaction ID: SA11AI.65736

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 201 / 305

(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)

Marianella Perdomo

Mailing Address 1835 Adare Drive

City

Clemmons

State

NC

Zip Code

27012

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65893

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Marianella Perdomo

Mailing Address 1835 Adare Drive

City

Clemmons

State

NC

Zip Code

27012

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 ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.66088

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Marianella Perdomo

Mailing Address 1835 Adare Drive

City

Clemmons

State

NC

Zip Code

27012

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 ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.66258

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 202 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A.

Full Name (Last, First, Middle Initial)

Marianella Perdomo

Mailing Address 1835 Adare Drive

City

Clemmons

State

NC

Zip Code

27012

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 ▼

337.58

Date of Receipt

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

Transaction ID: SA11AI.66425

Amount of Each Receipt this Period

87.58

B.

Full Name (Last, First, Middle Initial)

Gerald Petkau

Mailing Address 402 Troycott Place

City

Cary

State

NC

Zip Code

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 ▼

829.85

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64476

Amount of Each Receipt this Period

62.35

C.

Full Name (Last, First, Middle Initial)

Gerald Petkau

Mailing Address 402 Troycott Place

City

Cary

State

NC

Zip Code

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 ▼

892.20

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64635

Amount of Each Receipt this Period

62.35

SUBTOTAL of Receipts This Page (optional)

212.28

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 203 / 305

(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)

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 ▼

954.55

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64792

Amount of Each Receipt this Period

62.35

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 ▼

1016.90

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64950

Amount of Each Receipt this Period

62.35

C.

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 ▼

1079.25

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65108

Amount of Each Receipt this Period

62.35

SUBTOTAL of Receipts This Page (optional)

187.05

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 204 / 305

(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
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1141.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	0	7

Transaction ID: SA11AI.65265

Amount of Each Receipt this Period

62.35

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
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1203.95

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	0	7

Transaction ID: SA11AI.65424

Amount of Each Receipt this Period

62.35

C.

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
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1266.30

Date of Receipt

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

Transaction ID: SA11AI.65581

Amount of Each Receipt this Period

62.35

SUBTOTAL of Receipts This Page (optional)

187.05

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 205 / 305

(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)

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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
BCBSNCOccupation
VP

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1328.65

Date of Receipt

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

Transaction ID: SA11AI.65738

Amount of Each Receipt this Period

62.35

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
BCBSNCOccupation
VP

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1391.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	7

Transaction ID: SA11AI.65895

Amount of Each Receipt this Period

62.35

C.

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
BCBSNCOccupation
VP

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1453.35

Date of Receipt

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

Transaction ID: SA11AI.66090

Amount of Each Receipt this Period

62.35

SUBTOTAL of Receipts This Page (optional)

187.05

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 206 / 305

(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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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
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1515.70

Date of Receipt

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

Transaction ID: SA11AI.66260

Amount of Each Receipt this Period

62.35

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
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1578.05

Date of Receipt

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

Transaction ID: SA11AI.66427

Amount of Each Receipt this Period

62.35

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
BCBSNCOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

411.78

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	7	/	2	0	0	7

Transaction ID: SA11AI.64479

Amount of Each Receipt this Period

29.77

SUBTOTAL of Receipts This Page (optional)

154.47

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 207 / 305

(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)

Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City

Durham

State

NC

Zip Code

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 ▼

441.55

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64638

Amount of Each Receipt this Period

29.77

B.

Full Name (Last, First, Middle Initial)

Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City

Durham

State

NC

Zip Code

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 ▼

471.32

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64795

Amount of Each Receipt this Period

29.77

C.

Full Name (Last, First, Middle Initial)

Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City

Durham

State

NC

Zip Code

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 ▼

501.09

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64953

Amount of Each Receipt this Period

29.77

SUBTOTAL of Receipts This Page (optional)

89.31

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: PAGE 208 / 305

(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)

Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City

Durham

State

NC

Zip Code

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 ▼

530.86

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65111

Amount of Each Receipt this Period

29.77

B.

Full Name (Last, First, Middle Initial)

Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City

Durham

State

NC

Zip Code

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 ▼

560.63

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65268

Amount of Each Receipt this Period

29.77

C.

Full Name (Last, First, Middle Initial)

Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City

Durham

State

NC

Zip Code

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 ▼

590.40

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65427

Amount of Each Receipt this Period

29.77

SUBTOTAL of Receipts This Page (optional)

89.31

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: PAGE 209 / 305

(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)

Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City

Durham

State

NC

Zip Code

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 ▼

620.17

Date of Receipt

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

Transaction ID: SA11AI.65584

Amount of Each Receipt this Period

29.77

B.

Full Name (Last, First, Middle Initial)

Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City

Durham

State

NC

Zip Code

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 ▼

649.94

Date of Receipt

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

Transaction ID: SA11AI.65741

Amount of Each Receipt this Period

29.77

C.

Full Name (Last, First, Middle Initial)

Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City

Durham

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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 ▼

679.71

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65898

Amount of Each Receipt this Period

29.77

SUBTOTAL of Receipts This Page (optional)

89.31

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 210 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.48

Date of Receipt

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

Transaction ID: SA11AI.66093

Amount of Each Receipt this Period

29.77

B.

Full Name (Last, First, Middle Initial)

Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City

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NC

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27713

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

739.25

Date of Receipt

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

Transaction ID: SA11AI.66263

Amount of Each Receipt this Period

29.77

C.

Full Name (Last, First, Middle Initial)

Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City

Durham

State

NC

Zip Code

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 ▼

769.02

Date of Receipt

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

Transaction ID: SA11AI.66430

Amount of Each Receipt this Period

29.77

SUBTOTAL of Receipts This Page (optional)

89.31

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: PAGE 211 / 305

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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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

Mailing Address 236 Coachlight Trail

City

Burlington

State

NC

Zip Code

27215

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.26

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64485

Amount of Each Receipt this Period

28.29

B.

Full Name (Last, First, Middle Initial)

Paul Reeves

Mailing Address 236 Coachlight Trail

City

Burlington

State

NC

Zip Code

27215

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.55

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64644

Amount of Each Receipt this Period

28.29

C.

Full Name (Last, First, Middle Initial)

Paul Reeves

Mailing Address 236 Coachlight Trail

City

Burlington

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27215

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.84

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64802

Amount of Each Receipt this Period

28.29

SUBTOTAL of Receipts This Page (optional)

84.87

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.13

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64960

Amount of Each Receipt this Period

28.29

B.

Full Name (Last, First, Middle Initial)

Paul Reeves

Mailing Address 236 Coachlight Trail

City

Burlington

State

NC

Zip Code

27215

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.42

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65118

Amount of Each Receipt this Period

28.29

C.

Full Name (Last, First, Middle Initial)

Paul Reeves

Mailing Address 236 Coachlight Trail

City

Burlington

State

NC

Zip Code

27215

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

532.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65275

Amount of Each Receipt this Period

28.29

SUBTOTAL of Receipts This Page (optional)

84.87

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 213 / 305

(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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federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	8	/	2	0	0	7

Transaction ID: SA11AI.65434

Amount of Each Receipt this Period

28.29

B.

Full Name (Last, First, Middle Initial)

Paul Reeves

Mailing Address 236 Coachlight Trail

City

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27215

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federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

589.29

Date of Receipt

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

Transaction ID: SA11AI.65591

Amount of Each Receipt this Period

28.29

C.

Full Name (Last, First, Middle Initial)

Paul Reeves

Mailing Address 236 Coachlight Trail

City

Burlington

State

NC

Zip Code

27215

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

617.58

Date of Receipt

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

Transaction ID: SA11AI.65748

Amount of Each Receipt this Period

28.29

SUBTOTAL of Receipts This Page (optional)

84.87

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 214 / 305

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Paul Reeves

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City

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NC

Zip Code

27215

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

645.87

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65905

Amount of Each Receipt this Period

28.29

B.

Full Name (Last, First, Middle Initial)

Paul Reeves

Mailing Address 236 Coachlight Trail

City

Burlington

State

NC

Zip Code

27215

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

674.16

Date of Receipt

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

Transaction ID: SA11AI.66100

Amount of Each Receipt this Period

28.29

C.

Full Name (Last, First, Middle Initial)

Paul Reeves

Mailing Address 236 Coachlight Trail

City

Burlington

State

NC

Zip Code

27215

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

702.45

Date of Receipt

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

Transaction ID: SA11AI.66272

Amount of Each Receipt this Period

28.29

SUBTOTAL of Receipts This Page (optional)

84.87

TOTAL This Period (last page this line number only)

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 215 / 305

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☒ 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)

Paul Reeves

Mailing Address 236 Coachlight Trail

City

Burlington

State

NC

Zip Code

27215

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.74

Date of Receipt

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

Transaction ID: SA11AI.66438

Amount of Each Receipt this Period

28.29

B.

Full Name (Last, First, Middle Initial)

Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City

Durham

State

NC

Zip Code

27712

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 ▼

1070.22

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64486

Amount of Each Receipt this Period

78.08

C.

Full Name (Last, First, Middle Initial)

Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City

Durham

State

NC

Zip Code

27712

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 ▼

1148.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64645

Amount of Each Receipt this Period

78.08

SUBTOTAL of Receipts This Page (optional)

184.45

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 216 / 305

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

A.

Full Name (Last, First, Middle Initial)

Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City

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State

NC

Zip Code

27712

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 ▼

1226.38

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64803

Amount of Each Receipt this Period

78.08

B.

Full Name (Last, First, Middle Initial)

Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

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27712

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1304.46

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64961

Amount of Each Receipt this Period

78.08

C.

Full Name (Last, First, Middle Initial)

Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City

Durham

State

NC

Zip Code

27712

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 ▼

1382.54

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65119

Amount of Each Receipt this Period

78.08

SUBTOTAL of Receipts This Page (optional)

234.24

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 217 / 305

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A.

Full Name (Last, First, Middle Initial)

Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City State Zip Code
Durham NC 27712

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 ▼

1460.62

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65276

Amount of Each Receipt this Period

78.08

B.

Full Name (Last, First, Middle Initial)

Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City State Zip Code
Durham NC 27712

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 ▼

1538.70

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65435

Amount of Each Receipt this Period

78.08

C.

Full Name (Last, First, Middle Initial)

Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City State Zip Code
Durham NC 27712

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 ▼

1616.78

Date of Receipt

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

Transaction ID: SA11AI.65592

Amount of Each Receipt this Period

78.08

SUBTOTAL of Receipts This Page (optional)

234.24

TOTAL This Period (last page this line number only)

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1694.86

Date of Receipt

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

Transaction ID: SA11AI.65749

Amount of Each Receipt this Period

78.08

B.

Full Name (Last, First, Middle Initial)

Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City

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27712

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1772.94

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65906

Amount of Each Receipt this Period

78.08

C.

Full Name (Last, First, Middle Initial)

Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City

Durham

State

NC

Zip Code

27712

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 ▼

1851.02

Date of Receipt

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

Transaction ID: SA11AI.66101

Amount of Each Receipt this Period

78.08

SUBTOTAL of Receipts This Page (optional)

234.24

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 219 / 305

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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City State Zip Code
Durham NC 27712

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 ▼

1929.10

Date of Receipt

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

Transaction ID: SA11AI.66273

Amount of Each Receipt this Period

78.08

B.

Full Name (Last, First, Middle Initial)

Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City State Zip Code
Durham NC 27712

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 ▼

2007.18

Date of Receipt

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

Transaction ID: SA11AI.66439

Amount of Each Receipt this Period

78.08

C.

Full Name (Last, First, Middle Initial)

Mr. Daniel Risku

Mailing Address 105 San Miguel Place

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 ▼

1294.86

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64488

Amount of Each Receipt this Period

93.14

SUBTOTAL of Receipts This Page (optional)

249.30

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 220 / 305

(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)

Mr. Daniel Risku

Mailing Address 105 San Miguel Place

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 ▼

1388.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64647

Amount of Each Receipt this Period

93.14

B.

Full Name (Last, First, Middle Initial)

Mr. Daniel Risku

Mailing Address 105 San Miguel Place

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 ▼

1524.19

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64805

Amount of Each Receipt this Period

136.19

C.

Full Name (Last, First, Middle Initial)

Mr. Daniel Risku

Mailing Address 105 San Miguel Place

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 ▼

1624.32

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64963

Amount of Each Receipt this Period

100.13

SUBTOTAL of Receipts This Page (optional)

329.46

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: PAGE 221 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A.

Full Name (Last, First, Middle Initial)

Mr. Daniel Risku

Mailing Address 105 San Miguel Place

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 ▼

1724.45

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65121

Amount of Each Receipt this Period

100.13

B.

Full Name (Last, First, Middle Initial)

Mr. Daniel Risku

Mailing Address 105 San Miguel Place

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 ▼

1824.58

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65278

Amount of Each Receipt this Period

100.13

C.

Full Name (Last, First, Middle Initial)

Mr. Daniel Risku

Mailing Address 105 San Miguel Place

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 ▼

1924.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65437

Amount of Each Receipt this Period

100.13

SUBTOTAL of Receipts This Page (optional)

300.39

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 222 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name (Last, First, Middle Initial)

Mr. Daniel Risku

Mailing Address 105 San Miguel Place

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 ▼

2024.84

Date of Receipt

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

Transaction ID: SA11AI.65594

Amount of Each Receipt this Period

100.13

B.

Full Name (Last, First, Middle Initial)

Mr. Daniel Risku

Mailing Address 105 San Miguel Place

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 ▼

2124.97

Date of Receipt

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

Transaction ID: SA11AI.65751

Amount of Each Receipt this Period

100.13

C.

Full Name (Last, First, Middle Initial)

Mr. Daniel Risku

Mailing Address 105 San Miguel Place

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 ▼

2225.10

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65908

Amount of Each Receipt this Period

100.13

SUBTOTAL of Receipts This Page (optional)

300.39

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 223 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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State

NC

Zip Code

27514

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2325.23

Date of Receipt

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

Transaction ID: SA11AI.66103

Amount of Each Receipt this Period

100.13

B.

Full Name (Last, First, Middle Initial)

Mr. Daniel Risku

Mailing Address 105 San Miguel Place

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 ▼

2425.36

Date of Receipt

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

Transaction ID: SA11AI.66275

Amount of Each Receipt this Period

100.13

C.

Full Name (Last, First, Middle Initial)

Mr. Daniel Risku

Mailing Address 105 San Miguel Place

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 ▼

2525.49

Date of Receipt

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

Transaction ID: SA11AI.66441

Amount of Each Receipt this Period

100.13

SUBTOTAL of Receipts This Page (optional)

300.39

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 224 / 305

(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)

Mr. Michael Roach

Mailing Address 201 Woodleaf Dr

City

Chapel Hill

State

NC

Zip Code

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64489

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Michael Roach

Mailing Address 201 Woodleaf Dr

City

Chapel Hill

State

NC

Zip Code

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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64648

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Michael Roach

Mailing Address 201 Woodleaf Dr

City

Chapel Hill

State

NC

Zip Code

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 ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64806

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 225 / 305

(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)

Mr. Michael Roach

Mailing Address 201 Woodleaf Dr

City

Chapel Hill

State

NC

Zip Code

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 ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64964

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Michael Roach

Mailing Address 201 Woodleaf Dr

City

Chapel Hill

State

NC

Zip Code

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 ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65122

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Michael Roach

Mailing Address 201 Woodleaf Dr

City

Chapel Hill

State

NC

Zip Code

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 ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65279

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 226 / 305

(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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A.

Full Name (Last, First, Middle Initial)

Mr. Michael Roach

Mailing Address 201 Woodleaf Dr

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	0	7

Transaction ID: SA11AI.65438

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Michael Roach

Mailing Address 201 Woodleaf Dr

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

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

Transaction ID: SA11AI.65595

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Michael Roach

Mailing Address 201 Woodleaf Dr

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID: SA11AI.65752

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 227 / 305

(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)

Mr. Michael Roach

Mailing Address 201 Woodleaf Dr

City

Chapel Hill

State

NC

Zip Code

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 ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65909

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Michael Roach

Mailing Address 201 Woodleaf Dr

City

Chapel Hill

State

NC

Zip Code

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 ▼

1200.00

Date of Receipt

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

Transaction ID: SA11AI.66104

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Michael Roach

Mailing Address 201 Woodleaf Dr

City

Chapel Hill

State

NC

Zip Code

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 ▼

1250.00

Date of Receipt

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

Transaction ID: SA11AI.66276

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 228 / 305

(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. Michael Roach

Mailing Address 201 Woodleaf Dr

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

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

Transaction ID: SA11AI.66442

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. John Roos

Mailing Address 119 Draymore Way

City

Morrisville

State

NC

Zip Code

27560

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2536.44

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	7	/	2	0	0	7

Transaction ID: SA11AI.64490

Amount of Each Receipt this Period

192.30

C.

Full Name (Last, First, Middle Initial)

Mr. John Roos

Mailing Address 119 Draymore Way

City

Morrisville

State

NC

Zip Code

27560

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2728.74

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	0	/	2	0	0	7

Transaction ID: SA11AI.64649

Amount of Each Receipt this Period

192.30

SUBTOTAL of Receipts This Page (optional)

434.60

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 229 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A.

Full Name (Last, First, Middle Initial)

Mr. John Roos

Mailing Address 119 Draymore Way

City

Morrisville

State

NC

Zip Code

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 ▼

2921.04

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64807

Amount of Each Receipt this Period

192.30

B.

Full Name (Last, First, Middle Initial)

Mr. John Roos

Mailing Address 119 Draymore Way

City

Morrisville

State

NC

Zip Code

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 ▼

3113.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64965

Amount of Each Receipt this Period

192.30

C.

Full Name (Last, First, Middle Initial)

Mr. John Roos

Mailing Address 119 Draymore Way

City

Morrisville

State

NC

Zip Code

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 ▼

3305.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65123

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: PAGE 230 / 305

(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)

Mr. John Roos

Mailing Address 119 Draymore Way

City

Morrisville

State

NC

Zip Code

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 ▼

3497.94

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65280

Amount of Each Receipt this Period

192.30

B.

Full Name (Last, First, Middle Initial)

Mr. John Roos

Mailing Address 119 Draymore Way

City

Morrisville

State

NC

Zip Code

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 ▼

3690.24

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65439

Amount of Each Receipt this Period

192.30

C.

Full Name (Last, First, Middle Initial)

Mr. John Roos

Mailing Address 119 Draymore Way

City

Morrisville

State

NC

Zip Code

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 ▼

3882.54

Date of Receipt

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

Transaction ID: SA11AI.65596

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: PAGE 231 / 305

(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. John Roos

Mailing Address 119 Draymore Way

City

Morrisville

State

NC

Zip Code

27560

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4074.84

Date of Receipt

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

Transaction ID: SA11AI.65753

Amount of Each Receipt this Period

192.30

B.

Full Name (Last, First, Middle Initial)

Mr. John Roos

Mailing Address 119 Draymore Way

City

Morrisville

State

NC

Zip Code

27560

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4267.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	7

Transaction ID: SA11AI.65910

Amount of Each Receipt this Period

192.30

C.

Full Name (Last, First, Middle Initial)

Mr. John Roos

Mailing Address 119 Draymore Way

City

Morrisville

State

NC

Zip Code

27560

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4459.44

Date of Receipt

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

Transaction ID: SA11AI.66105

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: PAGE 232 / 305

(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)

Mr. John Roos

Mailing Address 119 Draymore Way

City

Morrisville

State

NC

Zip Code

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 ▼

4651.74

Date of Receipt

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

Transaction ID: SA11AI.66277

Amount of Each Receipt this Period

192.30

B.

Full Name (Last, First, Middle Initial)

Mr. John Roos

Mailing Address 119 Draymore Way

City

Morrisville

State

NC

Zip Code

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 ▼

4844.04

Date of Receipt

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

Transaction ID: SA11AI.66443

Amount of Each Receipt this Period

192.30

C.

Full Name (Last, First, Middle Initial)

V Tarsha Rowland

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.58

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64650

Amount of Each Receipt this Period

28.26

SUBTOTAL of Receipts This Page (optional)

412.86

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 233 / 305

(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)

V Tarsha Rowland

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.84

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64808

Amount of Each Receipt this Period

28.26

B.

Full Name (Last, First, Middle Initial)

V Tarsha Rowland

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.10

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64966

Amount of Each Receipt this Period

28.26

C.

Full Name (Last, First, Middle Initial)

V Tarsha Rowland

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.36

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65124

Amount of Each Receipt this Period

28.26

SUBTOTAL of Receipts This Page (optional)

84.78

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 234 / 305

(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)

V Tarsha Rowland

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.62

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65281

Amount of Each Receipt this Period

28.26

B.

Full Name (Last, First, Middle Initial)

V Tarsha Rowland

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.88

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65440

Amount of Each Receipt this Period

28.26

C.

Full Name (Last, First, Middle Initial)

V Tarsha Rowland

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.14

Date of Receipt

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

Transaction ID: SA11AI.65597

Amount of Each Receipt this Period

28.26

SUBTOTAL of Receipts This Page (optional)

84.78

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 235 / 305

(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)

V Tarsha Rowland

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.40

Date of Receipt

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

Transaction ID: SA11AI.65754

Amount of Each Receipt this Period

28.26

B.

Full Name (Last, First, Middle Initial)

V Tarsha Rowland

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.66

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65911

Amount of Each Receipt this Period

28.26

C.

Full Name (Last, First, Middle Initial)

V Tarsha Rowland

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.92

Date of Receipt

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

Transaction ID: SA11AI.66106

Amount of Each Receipt this Period

28.26

SUBTOTAL of Receipts This Page (optional)

84.78

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 236 / 305

(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)

V Tarsha Rowland

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

493.18

Date of Receipt

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

Transaction ID: SA11AI.66278

Amount of Each Receipt this Period

28.26

B.

Full Name (Last, First, Middle Initial)

V Tarsha Rowland

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.44

Date of Receipt

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

Transaction ID: SA11AI.66444

Amount of Each Receipt this Period

28.26

C.

Full Name (Last, First, Middle Initial)

Mike Serozi

Mailing Address 128 Lochwood Dr. West

City

State

Zip Code

Cary

NC

27511

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

603.12

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64494

Amount of Each Receipt this Period

43.68

SUBTOTAL of Receipts This Page (optional)

100.20

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 237 / 305

(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)

Mike Serozi

Mailing Address 128 Lochwood Dr. West

City State Zip Code
 Cary NC 27511

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

646.80

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64653

Amount of Each Receipt this Period

43.68

B.

Full Name (Last, First, Middle Initial)

Mike Serozi

Mailing Address 128 Lochwood Dr. West

City State Zip Code
 Cary NC 27511

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.48

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64811

Amount of Each Receipt this Period

43.68

C.

Full Name (Last, First, Middle Initial)

Mike Serozi

Mailing Address 128 Lochwood Dr. West

City State Zip Code
 Cary NC 27511

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.16

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64969

Amount of Each Receipt this Period

43.68

SUBTOTAL of Receipts This Page (optional)

131.04

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 238 / 305

(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)

Mike Serozi

Mailing Address 128 Lochwood Dr. West

City State Zip Code
Cary NC 27511

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

777.84

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65127

Amount of Each Receipt this Period

43.68

B.

Full Name (Last, First, Middle Initial)

Mike Serozi

Mailing Address 128 Lochwood Dr. West

City State Zip Code
Cary NC 27511

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

821.52

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65285

Amount of Each Receipt this Period

43.68

C.

Full Name (Last, First, Middle Initial)

Mike Serozi

Mailing Address 128 Lochwood Dr. West

City State Zip Code
Cary NC 27511

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

865.20

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65444

Amount of Each Receipt this Period

43.68

SUBTOTAL of Receipts This Page (optional)

131.04

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 239 / 305

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A.

Full Name (Last, First, Middle Initial)

Mike Serozi

Mailing Address 128 Lochwood Dr. West

City

State

Zip Code

Cary

NC

27511

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

908.88

Date of Receipt

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

Transaction ID: SA11AI.65601

Amount of Each Receipt this Period

43.68

B.

Full Name (Last, First, Middle Initial)

Mike Serozi

Mailing Address 128 Lochwood Dr. West

City

State

Zip Code

Cary

NC

27511

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

952.56

Date of Receipt

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

Transaction ID: SA11AI.65758

Amount of Each Receipt this Period

43.68

C.

Full Name (Last, First, Middle Initial)

Mike Serozi

Mailing Address 128 Lochwood Dr. West

City

State

Zip Code

Cary

NC

27511

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

996.24

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65915

Amount of Each Receipt this Period

43.68

SUBTOTAL of Receipts This Page (optional)

131.04

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

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☒ 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)

Mike Serozi

Mailing Address 128 Lochwood Dr. West

City State Zip Code
 Cary NC 27511

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1039.92

Date of Receipt

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

Transaction ID: SA11AI.66110

Amount of Each Receipt this Period

43.68

B.

Full Name (Last, First, Middle Initial)

Mike Serozi

Mailing Address 128 Lochwood Dr. West

City State Zip Code
 Cary NC 27511

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.60

Date of Receipt

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

Transaction ID: SA11AI.66282

Amount of Each Receipt this Period

43.68

C.

Full Name (Last, First, Middle Initial)

Mike Serozi

Mailing Address 128 Lochwood Dr. West

City State Zip Code
 Cary NC 27511

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Resource/Technical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1127.28

Date of Receipt

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

Transaction ID: SA11AI.66448

Amount of Each Receipt this Period

43.68

SUBTOTAL of Receipts This Page (optional)

131.04

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 241 / 305

(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)

Myra Shobande

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.38

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	0	7

Transaction ID: SA11AI.65287

Amount of Each Receipt this Period

5.00

B.

Full Name (Last, First, Middle Initial)

Myra Shobande

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.38

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	0	7

Transaction ID: SA11AI.65446

Amount of Each Receipt this Period

5.00

C.

Full Name (Last, First, Middle Initial)

Myra Shobande

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.38

Date of Receipt

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

Transaction ID: SA11AI.65603

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional)

15.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 242 / 305

(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)

Myra Shobande

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.38

Date of Receipt

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

Transaction ID: SA11AI.65760

Amount of Each Receipt this Period

5.00

B.

Full Name (Last, First, Middle Initial)

Myra Shobande

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.38

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65917

Amount of Each Receipt this Period

5.00

C.

Full Name (Last, First, Middle Initial)

Myra Shobande

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.38

Date of Receipt

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

Transaction ID: SA11AI.66112

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional)

15.00

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

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(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)

Myra Shobande

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.38

Date of Receipt

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

Transaction ID: SA11AI.66284

Amount of Each Receipt this Period

5.00

B.

Full Name (Last, First, Middle Initial)

Myra Shobande

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.38

Date of Receipt

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

Transaction ID: SA11AI.66450

Amount of Each Receipt this Period

5.00

C.

Full Name (Last, First, Middle Initial)

E Ronald Smith

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.90

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64497

Amount of Each Receipt this Period

60.87

SUBTOTAL of Receipts This Page (optional)

70.87

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

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☒ 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)

E Ronald Smith

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

781.77

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64656

Amount of Each Receipt this Period

60.87

B.

Full Name (Last, First, Middle Initial)

E Ronald Smith

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

842.64

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64814

Amount of Each Receipt this Period

60.87

C.

Full Name (Last, First, Middle Initial)

E Ronald Smith

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

903.51

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64972

Amount of Each Receipt this Period

60.87

SUBTOTAL of Receipts This Page (optional)

182.61

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 245 / 305

(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)

E Ronald Smith

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

964.38

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65130

Amount of Each Receipt this Period

60.87

B.

Full Name (Last, First, Middle Initial)

E Ronald Smith

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1025.25

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65288

Amount of Each Receipt this Period

60.87

C.

Full Name (Last, First, Middle Initial)

E Ronald Smith

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1086.12

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65447

Amount of Each Receipt this Period

60.87

SUBTOTAL of Receipts This Page (optional)

182.61

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 246 / 305

(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)

E Ronald Smith

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1146.99

Date of Receipt

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

Transaction ID: SA11AI.65604

Amount of Each Receipt this Period

60.87

B.

Full Name (Last, First, Middle Initial)

E Ronald Smith

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1207.86

Date of Receipt

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

Transaction ID: SA11AI.65761

Amount of Each Receipt this Period

60.87

C.

Full Name (Last, First, Middle Initial)

E Ronald Smith

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1268.73

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65918

Amount of Each Receipt this Period

60.87

SUBTOTAL of Receipts This Page (optional)

182.61

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 247 / 305

(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)

E Ronald Smith

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1329.60

Date of Receipt

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

Transaction ID: SA11AI.66113

Amount of Each Receipt this Period

60.87

B.

Full Name (Last, First, Middle Initial)

E Ronald Smith

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1390.47

Date of Receipt

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

Transaction ID: SA11AI.66285

Amount of Each Receipt this Period

60.87

C.

Full Name (Last, First, Middle Initial)

E Ronald Smith

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1451.34

Date of Receipt

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

Transaction ID: SA11AI.66451

Amount of Each Receipt this Period

60.87

SUBTOTAL of Receipts This Page (optional)

182.61

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 248 / 305

(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)

William Smith

Mailing Address 303 Lynden Valley Court

City State Zip Code
 Cary NC 27519

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 ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64499

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

William Smith

Mailing Address 303 Lynden Valley Court

City State Zip Code
 Cary NC 27519

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64658

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

William Smith

Mailing Address 303 Lynden Valley Court

City State Zip Code
 Cary NC 27519

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 ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64816

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 249 / 305

(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)

William Smith

Mailing Address 303 Lynden Valley Court

City

State

Zip Code

Cary

NC

27519

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 ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64974

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

William Smith

Mailing Address 303 Lynden Valley Court

City

State

Zip Code

Cary

NC

27519

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 ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65132

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

William Smith

Mailing Address 303 Lynden Valley Court

City

State

Zip Code

Cary

NC

27519

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 ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65290

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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A.

Full Name (Last, First, Middle Initial)

William Smith

Mailing Address 303 Lynden Valley Court

City

State

Zip Code

Cary

NC

27519

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65449

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

William Smith

Mailing Address 303 Lynden Valley Court

City

State

Zip Code

Cary

NC

27519

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 ▼

420.00

Date of Receipt

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

Transaction ID: SA11AI.65606

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

William Smith

Mailing Address 303 Lynden Valley Court

City

State

Zip Code

Cary

NC

27519

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 ▼

440.00

Date of Receipt

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

Transaction ID: SA11AI.65763

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

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

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for each category of the
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FOR LINE NUMBER: PAGE 251 / 305

(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)

William Smith

Mailing Address 303 Lynden Valley Court

City

State

Zip Code

Cary

NC

27519

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 ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65920

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

William Smith

Mailing Address 303 Lynden Valley Court

City

State

Zip Code

Cary

NC

27519

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 ▼

480.00

Date of Receipt

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

Transaction ID: SA11AI.66115

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

William Smith

Mailing Address 303 Lynden Valley Court

City

State

Zip Code

Cary

NC

27519

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 ▼

500.00

Date of Receipt

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

Transaction ID: SA11AI.66287

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 252 / 305

(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)

William Smith

Mailing Address 303 Lynden Valley Court

City	State	Zip Code
Cary	NC	27519

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

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

Transaction ID: SA11AI.66453

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

John Sternbergh

Mailing Address 3726 St. Mark's Road

City	State	Zip Code
Durham *	NC	27707

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	7	/	2	0	0	7

Transaction ID: SA11AI.64501

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

John Sternbergh

Mailing Address 3726 St. Mark's Road

City	State	Zip Code
Durham *	NC	27707

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	0	/	2	0	0	7

Transaction ID: SA11AI.64660

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 253 / 305

(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)

John Sternbergh

Mailing Address 3726 St. Mark's Road

City

Durham *

State

NC

Zip Code

27707

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 ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64818

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

John Sternbergh

Mailing Address 3726 St. Mark's Road

City

Durham *

State

NC

Zip Code

27707

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 ▼

2125.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64976

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

John Sternbergh

Mailing Address 3726 St. Mark's Road

City

Durham *

State

NC

Zip Code

27707

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 ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65134

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 254 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A.

Full Name (Last, First, Middle Initial)

John Sternbergh

Mailing Address 3726 St. Mark's Road

City

Durham *

State

NC

Zip Code

27707

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 ▼

2375.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65292

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

John Sternbergh

Mailing Address 3726 St. Mark's Road

City

Durham *

State

NC

Zip Code

27707

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 ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65451

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

John Sternbergh

Mailing Address 3726 St. Mark's Road

City

Durham *

State

NC

Zip Code

27707

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 ▼

2625.00

Date of Receipt

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

Transaction ID: SA11AI.65608

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 255 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Full Name (Last, First, Middle Initial)

John Sternbergh

Mailing Address 3726 St. Mark's Road

City

Durham *

State

NC

Zip Code

27707

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 ▼

2750.00

Date of Receipt

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

Transaction ID: SA11AI.65765

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

John Sternbergh

Mailing Address 3726 St. Mark's Road

City

Durham *

State

NC

Zip Code

27707

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 ▼

2875.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65922

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

John Sternbergh

Mailing Address 3726 St. Mark's Road

City

Durham *

State

NC

Zip Code

27707

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 ▼

3008.48

Date of Receipt

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

Transaction ID: SA11AI.66117

Amount of Each Receipt this Period

133.48

SUBTOTAL of Receipts This Page (optional)

383.48

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 256 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A.

Full Name (Last, First, Middle Initial)

John Sternbergh

Mailing Address 3726 St. Mark's Road

City State Zip Code
Durham * NC 27707

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 ▼

3141.96

Date of Receipt

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

Transaction ID: SA11AI.66289

Amount of Each Receipt this Period

133.48

B.

Full Name (Last, First, Middle Initial)

John Sternbergh

Mailing Address 3726 St. Mark's Road

City State Zip Code
Durham * NC 27707

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 ▼

3275.44

Date of Receipt

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

Transaction ID: SA11AI.66455

Amount of Each Receipt this Period

133.48

C.

Full Name (Last, First, Middle Initial)

Mark Stinneford

Mailing Address 104 Aborfield Court

City State Zip Code
Cary NC 27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: SA11AI.65610

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

276.96

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 257 / 305

(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)

Mark Stinneford

Mailing Address 104 Aborfield Court

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: SA11AI.65767

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Mark Stinneford

Mailing Address 104 Aborfield Court

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65924

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Mark Stinneford

Mailing Address 104 Aborfield Court

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.66119

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 258 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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A.

Full Name (Last, First, Middle Initial)

Mark Stinneford

Mailing Address 104 Aborfield Court

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.66291

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Mark Stinneford

Mailing Address 104 Aborfield Court

City

State

Zip Code

Cary

NC

27513

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: SA11AI.66457

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Richard Supinski

Mailing Address 2610 Lochmore Drive

City

State

Zip Code

Raleigh

NC

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 ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64508

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

40.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 259 / 305

(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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64667

Amount of Each Receipt this Period

20.00

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 ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64825

Amount of Each Receipt this Period

20.00

C.

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 ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64983

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 260 / 305

(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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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
BCBSNCOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	7

Transaction ID: SA11AI.65141

Amount of Each Receipt this Period

20.00

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
BCBSNCOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	7

Transaction ID: SA11AI.65299

Amount of Each Receipt this Period

20.00

C.

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
BCBSNCOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	8	/	2	0	0	7

Transaction ID: SA11AI.65458

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 261 / 305

(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 ▼

420.00

Date of Receipt

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

Transaction ID: SA11AI.65615

Amount of Each Receipt this Period

20.00

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 ▼

440.00

Date of Receipt

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

Transaction ID: SA11AI.65772

Amount of Each Receipt this Period

20.00

C.

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 ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65929

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 262 / 305

(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)

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C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

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

Transaction ID: SA11AI.66124

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Richard Supinski

Mailing Address 2610 Lochmore Drive

City

Raleigh

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NC

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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 ▼

510.00

Date of Receipt

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

Transaction ID: SA11AI.66296

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Richard Supinski

Mailing Address 2610 Lochmore Drive

City

Raleigh

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NC

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27608

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

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

Transaction ID: SA11AI.66462

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 263 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A.

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 ▼

700.35

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64509

Amount of Each Receipt this Period

50.55

B.

Full Name (Last, First, Middle Initial)

Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City

Chapel Hill

State

NC

Zip Code

27514

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.90

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64668

Amount of Each Receipt this Period

50.55

C.

Full Name (Last, First, Middle Initial)

Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City

Chapel Hill

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.45

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64826

Amount of Each Receipt this Period

50.55

SUBTOTAL of Receipts This Page (optional)

151.65

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 264 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

852.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64984

Amount of Each Receipt this Period

50.55

B.

Full Name (Last, First, Middle Initial)

Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City

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27514

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federal political committee.

C

Name of Employer
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Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

902.55

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65142

Amount of Each Receipt this Period

50.55

C.

Full Name (Last, First, Middle Initial)

Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City

Chapel Hill

State

NC

Zip Code

27514

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

953.10

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65300

Amount of Each Receipt this Period

50.55

SUBTOTAL of Receipts This Page (optional)

151.65

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 265 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1003.65

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65459

Amount of Each Receipt this Period

50.55

B.

Full Name (Last, First, Middle Initial)

Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City

Chapel Hill

State

NC

Zip Code

27514

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federal political committee.

C

Name of Employer
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Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1054.20

Date of Receipt

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

Transaction ID: SA11AI.65616

Amount of Each Receipt this Period

50.55

C.

Full Name (Last, First, Middle Initial)

Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1104.75

Date of Receipt

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

Transaction ID: SA11AI.65773

Amount of Each Receipt this Period

50.55

SUBTOTAL of Receipts This Page (optional)

151.65

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 266 / 305

(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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federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1155.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	7

Transaction ID: SA11AI.65930

Amount of Each Receipt this Period

50.55

B.

Full Name (Last, First, Middle Initial)

Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City

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Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.85

Date of Receipt

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

Transaction ID: SA11AI.66125

Amount of Each Receipt this Period

50.55

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
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1256.40

Date of Receipt

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

Transaction ID: SA11AI.66297

Amount of Each Receipt this Period

50.55

SUBTOTAL of Receipts This Page (optional)

151.65

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 267 / 305

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Chapel Hill

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27514

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1306.95

Date of Receipt

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

Transaction ID: SA11AI.66463

Amount of Each Receipt this Period

50.55

B.

Full Name (Last, First, Middle Initial)

Robert Vavrina

Mailing Address 315 Northcreek Dr.

City

Durham

State

NC

Zip Code

27707

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 ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64514

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Robert Vavrina

Mailing Address 315 Northcreek Dr.

City

Durham

State

NC

Zip Code

27707

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 ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64673

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.55

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 268 / 305

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64831

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Robert Vavrina

Mailing Address 315 Northcreek Dr.

City

Durham

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64989

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Robert Vavrina

Mailing Address 315 Northcreek Dr.

City

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State

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27707

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 ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65147

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 269 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65305

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Robert Vavrina

Mailing Address 315 Northcreek Dr.

City

Durham

State

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Zip Code

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65464

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Robert Vavrina

Mailing Address 315 Northcreek Dr.

City

Durham

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Zip Code

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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 ▼

2100.00

Date of Receipt

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

Transaction ID: SA11AI.65621

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 270 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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C

Name of Employer
BCBSNC

Occupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

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

Transaction ID: SA11AI.65778

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Robert Vavrina

Mailing Address 315 Northcreek Dr.

City

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federal political committee.

C

Name of Employer
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Occupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65935

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Robert Vavrina

Mailing Address 315 Northcreek Dr.

City

Durham

State

NC

Zip Code

27707

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 ▼

2400.00

Date of Receipt

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

Transaction ID: SA11AI.66130

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 271 / 305

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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C

Name of Employer
BCBSNC

Occupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11AI.66302

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Robert Vavrina

Mailing Address 315 Northcreek Dr.

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C

Name of Employer
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SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

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

Transaction ID: SA11AI.66468

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Jason Weinstein

Mailing Address 1604 Foreman Street

City

Hillsborough

State

NC

Zip Code

27278

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Resource Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.83

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64519

Amount of Each Receipt this Period

23.17

SUBTOTAL of Receipts This Page (optional)

223.17

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 272 / 305

(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)

Jason Weinstein

Mailing Address 1604 Foreman Street

City

Hillsborough

State

NC

Zip Code

27278

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64678

Amount of Each Receipt this Period

23.17

B.

Full Name (Last, First, Middle Initial)

Jason Weinstein

Mailing Address 1604 Foreman Street

City

Hillsborough

State

NC

Zip Code

27278

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.17

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64836

Amount of Each Receipt this Period

23.17

C.

Full Name (Last, First, Middle Initial)

Jason Weinstein

Mailing Address 1604 Foreman Street

City

Hillsborough

State

NC

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27278

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.34

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64994

Amount of Each Receipt this Period

23.17

SUBTOTAL of Receipts This Page (optional)

69.51

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 273 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

411.51

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65152

Amount of Each Receipt this Period

23.17

B.

Full Name (Last, First, Middle Initial)

Jason Weinstein

Mailing Address 1604 Foreman Street

City

Hillsborough

State

NC

Zip Code

27278

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

434.68

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65310

Amount of Each Receipt this Period

23.17

C.

Full Name (Last, First, Middle Initial)

Jason Weinstein

Mailing Address 1604 Foreman Street

City

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27278

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federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.85

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65469

Amount of Each Receipt this Period

23.17

SUBTOTAL of Receipts This Page (optional)

69.51

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 274 / 305

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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27278

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federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.02

Date of Receipt

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

Transaction ID: SA11AI.65626

Amount of Each Receipt this Period

23.17

B.

Full Name (Last, First, Middle Initial)

Jason Weinstein

Mailing Address 1604 Foreman Street

City

Hillsborough

State

NC

Zip Code

27278

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.19

Date of Receipt

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

Transaction ID: SA11AI.65783

Amount of Each Receipt this Period

23.17

C.

Full Name (Last, First, Middle Initial)

Jason Weinstein

Mailing Address 1604 Foreman Street

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NC

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27278

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federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.36

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65940

Amount of Each Receipt this Period

23.17

SUBTOTAL of Receipts This Page (optional)

69.51

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 275 / 305

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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27278

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federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.53

Date of Receipt

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

Transaction ID: SA11AI.66135

Amount of Each Receipt this Period

23.17

B.

Full Name (Last, First, Middle Initial)

Jason Weinstein

Mailing Address 1604 Foreman Street

City

Hillsborough

State

NC

Zip Code

27278

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

573.70

Date of Receipt

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

Transaction ID: SA11AI.66307

Amount of Each Receipt this Period

23.17

C.

Full Name (Last, First, Middle Initial)

Jason Weinstein

Mailing Address 1604 Foreman Street

City

Hillsborough

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NC

Zip Code

27278

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation

Resource Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

596.87

Date of Receipt

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

Transaction ID: SA11AI.66473

Amount of Each Receipt this Period

23.17

SUBTOTAL of Receipts This Page (optional)

69.51

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 276 / 305

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

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A.

Full Name (Last, First, Middle Initial)

Jeffrey Weinstock

Mailing Address 102 Tremont Circle

City

Chapel Hill

State

NC

Zip Code

27516

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 ▼

403.20

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64520

Amount of Each Receipt this Period

28.80

B.

Full Name (Last, First, Middle Initial)

Jeffrey Weinstock

Mailing Address 102 Tremont Circle

City

Chapel Hill

State

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Zip Code

27516

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64679

Amount of Each Receipt this Period

28.80

C.

Full Name (Last, First, Middle Initial)

Jeffrey Weinstock

Mailing Address 102 Tremont Circle

City

Chapel Hill

State

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.80

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64837

Amount of Each Receipt this Period

28.80

SUBTOTAL of Receipts This Page (optional)

86.40

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 277 / 305

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Full Name (Last, First, Middle Initial)

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Mailing Address 102 Tremont Circle

City

Chapel Hill

State

NC

Zip Code

27516

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

489.60

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64995

Amount of Each Receipt this Period

28.80

B.

Full Name (Last, First, Middle Initial)

Jeffrey Weinstock

Mailing Address 102 Tremont Circle

City

Chapel Hill

State

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

518.40

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65153

Amount of Each Receipt this Period

28.80

C.

Full Name (Last, First, Middle Initial)

Jeffrey Weinstock

Mailing Address 102 Tremont Circle

City

Chapel Hill

State

NC

Zip Code

27516

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 ▼

547.20

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65311

Amount of Each Receipt this Period

28.80

SUBTOTAL of Receipts This Page (optional)

86.40

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65470

Amount of Each Receipt this Period

28.80

B.

Full Name (Last, First, Middle Initial)

Jeffrey Weinstock

Mailing Address 102 Tremont Circle

City

Chapel Hill

State

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Zip Code

27516

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.80

Date of Receipt

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

Transaction ID: SA11AI.65627

Amount of Each Receipt this Period

28.80

C.

Full Name (Last, First, Middle Initial)

Jeffrey Weinstock

Mailing Address 102 Tremont Circle

City

Chapel Hill

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27516

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.60

Date of Receipt

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

Transaction ID: SA11AI.65784

Amount of Each Receipt this Period

28.80

SUBTOTAL of Receipts This Page (optional)

86.40

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 279 / 305

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65941

Amount of Each Receipt this Period

28.80

B.

Full Name (Last, First, Middle Initial)

Jeffrey Weinstock

Mailing Address 102 Tremont Circle

City

Chapel Hill

State

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.20

Date of Receipt

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

Transaction ID: SA11AI.66136

Amount of Each Receipt this Period

28.80

C.

Full Name (Last, First, Middle Initial)

Jeffrey Weinstock

Mailing Address 102 Tremont Circle

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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

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

Transaction ID: SA11AI.66308

Amount of Each Receipt this Period

28.80

SUBTOTAL of Receipts This Page (optional)

86.40

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 280 / 305

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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C

Name of Employer
BCBSNC

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.80

Date of Receipt

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

Transaction ID: SA11AI.66474

Amount of Each Receipt this Period

28.80

B.

Full Name (Last, First, Middle Initial)

Dionne Wells

Mailing Address 9228 Cornwell Dr

City

Wake Forest

State

NC

Zip Code

27587

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: SA11AI.65628

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Dionne Wells

Mailing Address 9228 Cornwell Dr

City

Wake Forest

State

NC

Zip Code

27587

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: SA11AI.65785

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

48.80

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 281 / 305

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Dionne Wells

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City

Wake Forest

State

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Zip Code

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federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

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 9 / 2 0 0 7

Transaction ID: SA11AI.65942

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Dionne Wells

Mailing Address 9228 Cornwell Dr

City

Wake Forest

State

NC

Zip Code

27587

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

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 7

Transaction ID: SA11AI.66137

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Dionne Wells

Mailing Address 9228 Cornwell Dr

City

Wake Forest

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Zip Code

27587

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.66309

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 282 / 305

(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)

Dionne Wells

Mailing Address 9228 Cornwell Dr

City

Wake Forest

State

NC

Zip Code

27587

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: SA11AI.66475

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Mr. James Wilson

Mailing Address 227 Midenhall Way

City

Cary

State

NC

Zip Code

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 ▼

2754.62

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64524

Amount of Each Receipt this Period

199.23

C.

Full Name (Last, First, Middle Initial)

Mr. James Wilson

Mailing Address 227 Midenhall Way

City

Cary

State

NC

Zip Code

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 ▼

2953.85

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64683

Amount of Each Receipt this Period

199.23

SUBTOTAL of Receipts This Page (optional)

408.46

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: PAGE 283 / 305

(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)

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 ▼

3153.08

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64841

Amount of Each Receipt this Period

199.23

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 ▼

3352.31

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.64999

Amount of Each Receipt this Period

199.23

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 ▼

3551.54

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65157

Amount of Each Receipt this Period

199.23

SUBTOTAL of Receipts This Page (optional)

597.69

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 284 / 305

(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)

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 ▼

3743.84

Date of Receipt

M M / D D / Y Y Y Y Y
 0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65315

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 ▼

3936.14

Date of Receipt

M M / D D / Y Y Y Y Y
 0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65474

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 ▼

4128.44

Date of Receipt

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

Transaction ID: SA11AI.65631

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: PAGE 285 / 305

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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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 ▼

4320.74

Date of Receipt

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

Transaction ID: SA11AI.65788

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 ▼

4513.04

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65945

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 ▼

4705.34

Date of Receipt

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

Transaction ID: SA11AI.66140

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: PAGE 286 / 305

(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)

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 ▼

4897.64

Date of Receipt

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

Transaction ID: SA11AI.66312

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 ▼

5089.94

Date of Receipt

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

Transaction ID: SA11AI.66480

Amount of Each Receipt this Period

192.30

C.

Full Name (Last, First, Middle Initial)

Mr. Christopher Woodfin

Mailing Address 100 Palmyra Place

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 ▼

1149.63

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64525

Amount of Each Receipt this Period

83.12

SUBTOTAL of Receipts This Page (optional)

467.72

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 287 / 305

(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. Christopher Woodfin

Mailing Address 100 Palmyra Place

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1232.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	0	/	2	0	0	7

Transaction ID: SA11AI.64684

Amount of Each Receipt this Period

83.12

B.

Full Name (Last, First, Middle Initial)

Mr. Christopher Woodfin

Mailing Address 100 Palmyra Place

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1315.87

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	0	7

Transaction ID: SA11AI.64842

Amount of Each Receipt this Period

83.12

C.

Full Name (Last, First, Middle Initial)

Mr. Christopher Woodfin

Mailing Address 100 Palmyra Place

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1398.99

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	7	/	2	0	0	7

Transaction ID: SA11AI.65000

Amount of Each Receipt this Period

83.12

SUBTOTAL of Receipts This Page (optional)

249.36

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 288 / 305

(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)

Mr. Christopher Woodfin

Mailing Address 100 Palmyra Place

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 ▼

1482.11

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65158

Amount of Each Receipt this Period

83.12

B.

Full Name (Last, First, Middle Initial)

Mr. Christopher Woodfin

Mailing Address 100 Palmyra Place

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 ▼

1565.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65316

Amount of Each Receipt this Period

83.12

C.

Full Name (Last, First, Middle Initial)

Mr. Christopher Woodfin

Mailing Address 100 Palmyra Place

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 ▼

1648.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65475

Amount of Each Receipt this Period

83.12

SUBTOTAL of Receipts This Page (optional)

249.36

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 289 / 305

(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)

Mr. Christopher Woodfin

Mailing Address 100 Palmyra Place

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 ▼

1731.47

Date of Receipt

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

Transaction ID: SA11AI.65632

Amount of Each Receipt this Period

83.12

B.

Full Name (Last, First, Middle Initial)

Mr. Christopher Woodfin

Mailing Address 100 Palmyra Place

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 ▼

1814.59

Date of Receipt

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

Transaction ID: SA11AI.65789

Amount of Each Receipt this Period

83.12

C.

Full Name (Last, First, Middle Initial)

Mr. Christopher Woodfin

Mailing Address 100 Palmyra Place

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 ▼

1897.71

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65946

Amount of Each Receipt this Period

83.12

SUBTOTAL of Receipts This Page (optional)

249.36

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 290 / 305

(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)

Mr. Christopher Woodfin

Mailing Address 100 Palmyra Place

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 ▼

1980.83

Date of Receipt

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

Transaction ID: SA11AI.66141

Amount of Each Receipt this Period

83.12

B.

Full Name (Last, First, Middle Initial)

Mr. Christopher Woodfin

Mailing Address 100 Palmyra Place

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 ▼

2063.95

Date of Receipt

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

Transaction ID: SA11AI.66313

Amount of Each Receipt this Period

83.12

C.

Full Name (Last, First, Middle Initial)

Mr. Christopher Woodfin

Mailing Address 100 Palmyra Place

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 ▼

2147.07

Date of Receipt

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

Transaction ID: SA11AI.66481

Amount of Each Receipt this Period

83.12

SUBTOTAL of Receipts This Page (optional)

249.36

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 291 / 305

(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)

Kenneth Wright

Mailing Address 618 S. Wingate Dr.

City

Wake Forest

State

NC

Zip Code

27587

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 ▼

499.60

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.64526

Amount of Each Receipt this Period

36.20

B.

Full Name (Last, First, Middle Initial)

Kenneth Wright

Mailing Address 618 S. Wingate Dr.

City

Wake Forest

State

NC

Zip Code

27587

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 ▼

535.80

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.64685

Amount of Each Receipt this Period

36.20

C.

Full Name (Last, First, Middle Initial)

Kenneth Wright

Mailing Address 618 S. Wingate Dr.

City

Wake Forest

State

NC

Zip Code

27587

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 ▼

572.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 7

Transaction ID: SA11AI.64843

Amount of Each Receipt this Period

36.20

SUBTOTAL of Receipts This Page (optional)

108.60

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 292 / 305

(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)

Kenneth Wright

Mailing Address 618 S. Wingate Dr.

City

Wake Forest

State

NC

Zip Code

27587

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 ▼

608.20

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.65001

Amount of Each Receipt this Period

36.20

B.

Full Name (Last, First, Middle Initial)

Kenneth Wright

Mailing Address 618 S. Wingate Dr.

City

Wake Forest

State

NC

Zip Code

27587

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 ▼

644.40

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.65159

Amount of Each Receipt this Period

36.20

C.

Full Name (Last, First, Middle Initial)

Kenneth Wright

Mailing Address 618 S. Wingate Dr.

City

Wake Forest

State

NC

Zip Code

27587

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 ▼

680.60

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.65317

Amount of Each Receipt this Period

36.20

SUBTOTAL of Receipts This Page (optional)

108.60

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 293 / 305

(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)

Kenneth Wright

Mailing Address 618 S. Wingate Dr.

City

Wake Forest

State

NC

Zip Code

27587

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 ▼

716.80

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.65476

Amount of Each Receipt this Period

36.20

B.

Full Name (Last, First, Middle Initial)

Kenneth Wright

Mailing Address 618 S. Wingate Dr.

City

Wake Forest

State

NC

Zip Code

27587

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 ▼

753.00

Date of Receipt

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

Transaction ID: SA11AI.65633

Amount of Each Receipt this Period

36.20

C.

Full Name (Last, First, Middle Initial)

Kenneth Wright

Mailing Address 618 S. Wingate Dr.

City

Wake Forest

State

NC

Zip Code

27587

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 ▼

789.20

Date of Receipt

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

Transaction ID: SA11AI.65790

Amount of Each Receipt this Period

36.20

SUBTOTAL of Receipts This Page (optional)

108.60

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 294 / 305

(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)

Kenneth Wright

Mailing Address 618 S. Wingate Dr.

City

Wake Forest

State

NC

Zip Code

27587

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 ▼

825.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: SA11AI.65947

Amount of Each Receipt this Period

36.20

B.

Full Name (Last, First, Middle Initial)

Kenneth Wright

Mailing Address 618 S. Wingate Dr.

City

Wake Forest

State

NC

Zip Code

27587

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 ▼

861.60

Date of Receipt

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

Transaction ID: SA11AI.66142

Amount of Each Receipt this Period

36.20

C.

Full Name (Last, First, Middle Initial)

Kenneth Wright

Mailing Address 618 S. Wingate Dr.

City

Wake Forest

State

NC

Zip Code

27587

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 ▼

897.80

Date of Receipt

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

Transaction ID: SA11AI.66314

Amount of Each Receipt this Period

36.20

SUBTOTAL of Receipts This Page (optional)

108.60

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 295 / 305

(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)

Kenneth Wright

Mailing Address 618 S. Wingate Dr.

City

Wake Forest

State

NC

Zip Code

27587

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSNCOccupation
Director

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

934.00

Date of Receipt

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

Transaction ID: SA11AI.66482

Amount of Each Receipt this Period

36.20

SUBTOTAL of Receipts This Page (optional)

36.20

TOTAL This Period (last page this line number only)

46682.47

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 296 / 305

<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

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) Elizabeth Dole Mailing Address P.O. Box 2109	Transaction ID: SB23.65951 Date of Disbursement <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>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	7										
M	M	/	D	D	/	Y	Y	Y	Y																						
0	8		1	0		2	0	0	7																						
City Salisbury State NC Zip Code 28145 Purpose of Disbursement contribution Candidate Name Elizabeth Dole Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																													
1000.00																															
B. Full Name (Last, First, Middle Initial) Hon. Bob Etheridge Mailing Address P.O. Box 28001 City Raleigh State NC Zip Code 27611 Purpose of Disbursement contribution Candidate Name Hon. Bob Etheridge Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 02 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.65949 Date of Disbursement <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>0</td><td>8</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	6		2	0	0	7	2500.00									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	8		0	6		2	0	0	7																						
2500.00																															
C. Full Name (Last, First, Middle Initial) Kay Hagan Mailing Address City State Zip Code Purpose of Disbursement contribution Candidate Name Sen. Kay Hagan Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.66484 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	7		2	0	0	7	2000.00									
M	M	/	D	D	/	Y	Y	Y	Y																						
1	2		1	7		2	0	0	7																						
2000.00																															

SUBTOTAL of Disbursements This Page (optional)

5500.00

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 297 / 305

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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)

Hon. Robin Hayes

Mailing Address 137 Union Street South

City State Zip Code
Concord NC 28025

Purpose of Disbursement
contribution

Candidate Name
Hon. Robin Hayes

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 08

Transaction ID: SB23.66485

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

Hon. Mike McIntyre

Mailing Address 218 Federal Building

City State Zip Code
Fayetteville NC 28301

Purpose of Disbursement
contribution

Candidate Name
Hon. Mike McIntyre

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 07

Transaction ID: SB23.65950

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Sen. Brad Miller

Mailing Address 200-301 Calibre Chase Dr.

City State Zip Code
Raleigh NC 27609

Purpose of Disbursement
contribution

Candidate Name
Sen. Brad Miller

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Transaction ID: SB23.65956

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3500.00

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 298 / 305

<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) Hon. Sue Myrick	Transaction ID: SB23.65948 Date of Disbursement																				
Mailing Address 9169 Bonnie Briar Cir.	<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>0</td><td>8</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	6		2	0	0	7												
City Charlotte State NC Zip Code 28277	Amount of Each Disbursement this Period																				
Purpose of Disbursement contribution	<table border="1"> <tr> <td>2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Candidate Name Hon. Sue Myrick	Category/Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 09	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) David Price	Transaction ID: SB23.65957 Date of Disbursement																				
Mailing Address P.O. Box 1986	<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>0</td><td>9</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	7		2	0	0	7												
City Raleigh State NC Zip Code 27602	Amount of Each Disbursement this Period																				
Purpose of Disbursement contribution	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name David Price	Category/Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) David Price	Transaction ID: SB23.66483 Date of Disbursement																				
Mailing Address P.O. Box 1986	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	0		2	0	0	7												
City Raleigh State NC Zip Code 27602	Amount of Each Disbursement this Period																				
Purpose of Disbursement contribution	<table border="1"> <tr> <td>2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name David Price	Category/Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

5500.00

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 299 / 305

<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)

Heath Shuler

Mailing Address

City

State

Zip Code

Purpose of Disbursement
contribution

Candidate Name
Heath Shuler

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC

District: 11

Transaction ID: SB23.65958

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

15500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 300 / 305

<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)

Lucy Allen

Mailing Address 312 N. Main St

City
LouisburgState
NCZip Code
27549Purpose of Disbursement
contributionCandidate Name
Lucy AllenCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 49

Transaction ID: SB29.65973

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	3	/	2	0	0	7

Amount of Each Disbursement this Period

750.00

B.

Full Name (Last, First, Middle Initial)

Mr. Tom Apodaca

Mailing Address 214 N. King St

City
HendersonvilleState
NCZip Code
28792Purpose of Disbursement
contributionCandidate Name
Mr. Tom ApodacaCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 48

Transaction ID: SB29.65960

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	7	/	2	0	0	7

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Sen. Marc Basnight

Mailing Address PO Box 302

City
ManteoState
NCZip Code
28403Purpose of Disbursement
contributionCandidate Name
Sen. Marc BasnightCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.65961

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	7	/	2	0	0	7

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

3750.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 301 / 305

<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)

BCBSA BluePac

Transaction ID: SB29.65954

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	5		2	0	0	7

Mailing Address 1310 G. Street N.W.
12th Floor

Amount of Each Disbursement this Period

City Washington State DC Zip Code 20005

1500.00

Purpose of Disbursement
contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

Phil Berger

Transaction ID: SB29.65962

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	0	7

Mailing Address 1809 Indian Trail

Amount of Each Disbursement this Period

City Eden State NC Zip Code 27288

1000.00

Purpose of Disbursement
contributionCandidate Name
Phil BergerCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)

Rep. Daniel Blue, Jr.

Transaction ID: SB29.65974

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	0	7

Mailing Address P.O. Box 1730

Amount of Each Disbursement this Period

City Raleigh State NC Zip Code 27602

1000.00

Purpose of Disbursement
contributionCandidate Name
Rep. Daniel Blue, Jr.Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

3500.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 302 / 305

<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)

Sen. Roy Cooper

Mailing Address P.O. Box 4538

City Rocky Mount State NC Zip Code 27803

Purpose of Disbursement
contributionCandidate Name
Sen. Roy CooperCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.65984

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Tricia Cotham

Mailing Address 9104 C Nolley ct.

City Charlotte State NC Zip Code 28270

Purpose of Disbursement
contributionCandidate Name
Tricia CothamCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District:

Transaction ID: SB29.65975

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	3	/	2	0	0	7

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Sen. Walter Dalton

Mailing Address 153 West Main St
Ste 116

City Forest City State NC Zip Code 28043

Purpose of Disbursement
contributionCandidate Name
Sen. Walter DaltonCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.65983

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	4	/	2	0	0	7

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 303 / 305

<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)

Rep. Jerry Dockham

Mailing Address P.O. Box 265

City
DentonState
NCZip Code
27239Purpose of Disbursement
contributionCandidate Name
Rep. Jerry DockhamCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.65964

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	0	7

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Bruce Goforth

Mailing Address 137 Stonecrest Dr.

City
AshevilleState
NCZip Code
28803Purpose of Disbursement
contributionCandidate Name
Bruce GoforthCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.65965

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	0	7

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Steve Goss

Mailing Address 166 Morningside Dr.

City
BooneState
NCZip Code
28607Purpose of Disbursement
contributionCandidate Name
Steve GossCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 45

Transaction ID: SB29.65971

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	0	7

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 PageFOR LINE NUMBER:
(check only one)

PAGE 304 / 305

<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)

Joe Hackney

Transaction ID: SB29.65966

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	0	7

Mailing Address 410 Martin Luther King Jr. Blvd

Amount of Each Disbursement this Period

City State Zip Code
Chapel Hill NC 27514

2500.00

Purpose of Disbursement
contributionCategory/
TypeCandidate Name
Joe HackneyOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 54

B.

Full Name (Last, First, Middle Initial)

Ty Harrell

Transaction ID: SB29.65969

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	0	7

Mailing Address P.O Box 27376

Amount of Each Disbursement this Period

City State Zip Code
Raleigh NC 27611

500.00

Purpose of Disbursement
contributionCategory/
TypeCandidate Name
Ty HarrellOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 41

C.

Full Name (Last, First, Middle Initial)

Sen. Fletcher L. Hartsell, Jr.

Transaction ID: SB29.65972

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	0	7

Mailing Address PO Box 1709

Amount of Each Disbursement this Period

City State Zip Code
Concord NC 28026

1500.00

Purpose of Disbursement
contributionCategory/
TypeCandidate Name
Sen. Fletcher L. Hartsell, Jr.Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

4500.00

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)

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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

A. Full Name (Last, First, Middle Initial) Hugh Holliman	Transaction ID: SB29.65968 Date of Disbursement																				
Mailing Address 102 Warrior 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>0</td><td>9</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	7		2	0	0	7												
City Lexington State NC Zip Code 27295	Amount of Each Disbursement this Period																				
Purpose of Disbursement contribution	<table border="1"> <tr> <td>2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name Hugh Holliman	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Julia Howard	Transaction ID: SB29.65980 Date of Disbursement																				
Mailing Address 203 Magnolia Avenue	<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>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	3		2	0	0	7												
City Mocksville State NC Zip Code 27028	Amount of Each Disbursement this Period																				
Purpose of Disbursement contribution	<table border="1"> <tr> <td>750.00</td> </tr> </table>	750.00																			
750.00																					
Candidate Name Julia Howard	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Sen. Anthony Rand	Transaction ID: SB29.65963 Date of Disbursement																				
Mailing Address 2014 Litho 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>0</td><td>9</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	7		2	0	0	7												
City Fayetteville State NC Zip Code 28304	Amount of Each Disbursement this Period																				
Purpose of Disbursement contribution	<table border="1"> <tr> <td>2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name Sen. Anthony Rand	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td>4750.00</td> </tr> </table>	4750.00																			
4750.00																					
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td>22000.00</td> </tr> </table>	22000.00																			
22000.00																					