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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Highmark PAC of Highmark Inc. 1800 Center Street ADDRESS (number and street) (Check if address is changed) Camp Hill 17089 PA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Stephen.Wojnaroski@highmark.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00302844 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Enterline, Richard, J.,, Type or Print Name of Treasurer Enterline, Richard, J., , [Electronically Filed] 03 19 2019 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

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		OMMITTEE Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	nplete the candidate
Name Cand			
Cand Party	lidate Affiliatio	Office Sought: House Senate President	State District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	ty Com	mittee: (National, State	(Democratic
(d)		This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party
Poli	tical A	ction Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	egregated fund or part
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Comi	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.		
	4.		

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Write or Type Committee Name		
Highmark PAC	of Highmark Inc.	
6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor
Highmark Inc.		
	1800 Center Street	
Mailing Address		
	Camp Hill PA	17089
	CITY STATE	ZIP CODE
Relationship: X Connected	Organization Affiliated Committee Joint Fundraising Represent	ative Leadership PAC Sponsor
 Custodian of Records: Identification books and records. 	ify by name, address (phone number optional) and position of the p	person in possession of committee
'	Stephen, J., ,	
Full Name	1800 Center Street 1B L4	
Mailing Address		
	Camp Hill PA	17089
Title or Position	CITY STATE	ZIP CODE
PAC Administrator	Telephone number	412 - 544 - 8910
8. Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee ssistant treasurer).	e; and the name and address of
Full Name Enterline, R	ichard, J., ,	
Mailing Address	1800 Center Street 1B L4	
		17011
	CITY STATE	ZIP CODE
Title or Position VP, Dep General Co.	Telephone number	717 - 302 - 4207

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Full Name of Designated Agent	Callenberger, Douglas, N., ,	
Mailing Address	1800 Center Street 1A L4	
	Camp Hill PA 17011 CITY STATE	ZIP CODE
Title or Position Director, Sales	Telephone number 717 –	302 - 2267
	Danceitorias: List all hanks or other denositorias in which the committee denosits funds, holds	
safety deposit bo Name of Bank, D	Depositories: List all banks or other depositories in which the committee deposits funds, holds oxes or maintains funds. Depository, etc. Citizens Bank	s accounts, rents
safety deposit bo	oxes or maintains funds. Depository, etc.	s accounts, rents
safety deposit bo. Name of Bank, D	Depository, etc. Citizens Bank	accounts, rents
safety deposit bo. Name of Bank, D	Depository, etc. Citizens Bank	s accounts, rents
safety deposit bo. Name of Bank, D	Depository, etc. Citizens Bank 4101 Carlisle Pike	ZIP CODE
safety deposit bo. Name of Bank, D	Citizens Bank 4101 Carlisle Pike Camp Hill CITY CITY STATE	
safety deposit bo. Name of Bank, D. Mailing Address	Citizens Bank 4101 Carlisle Pike Camp Hill CITY CITY STATE	
safety deposit bo. Name of Bank, D. Mailing Address	Citizens Bank 4101 Carlisle Pike Camp Hill CITY CITY STATE	
Safety deposit book Name of Bank, Dame of Ba	Citizens Bank 4101 Carlisle Pike Camp Hill CITY CITY STATE	
Safety deposit book Name of Bank, Dame of Ba	Citizens Bank 4101 Carlisle Pike Camp Hill CITY CITY STATE	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
=	Organization, Affiliated Committee, Joint Fund		e, or Leadership PAC Sponso
Mailing Address	1310 G Street,NW		
	Washington	DC	20005
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee Join by by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identif		t Fundraising Represent	Leadership PAC Spo
Designated Agent: Identif		t Fundraising Representa	Leadership PAC Spo
Designated Agent: Identif		t Fundraising Representation	Leadership PAC Spo
Designated Agent: Identif	y by name, address (phone number – optional)		
Designated Agent: Identif	by by name, address (phone number – optional)	STATE A	Leadership PAC Spo
Designated Agent: Identif	by by name, address (phone number – optional) CITY		
Designated Agent: Identification Full Name	cy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
Pesignated Agent: Identification Full Name	cy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A