

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

2014 APR 15 AM 10:58

FEC MAIL CENTER

BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)

ADDRESS (number and street)

P.O. Box 3248



Check if different
than previously
reported. (ACC)

OMAHA

NE

68124

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00276311

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
Year-End 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 (12S)

Election on

MM / DD / YYYY

in the
State of

State

(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

MM / DD / YYYY

in the
State of

State

5. Covering Period

01 / 01 / 2014

through

03 / 31 / 2014

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

David M. Anderson

Signature of Treasurer

David M. Anderson

Date

01 / 15 / 2014

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 BLUE SHIELD OF NE PAC (BLUEPAC)

Report Covering the Period:

From:

01 ' 01 ' 2014

To:

03 ' 31 ' 2014

COLUMN A
This Period

COLUMN B
Calendar Year-to-Date

6. (a) Cash on Hand
January 1,

2014

37,700.34

- (b) Cash on Hand at
Beginning of Reporting Period.....

37,700.34

- (c) Total Receipts (from Line 19)

7,229.88

7,229.88

- (d) Subtotal (add Lines 6(b) and
6(c) for Column A and Lines
6(a) and 6(c) for Column B)

44,930.22

44,930.22

7. Total Disbursements (from Line 31)

1,055.21

1,055.21

8. Cash on Hand at Close of
Reporting Period
(subtract Line 7 from Line 6(d))

43,875.01

43,875.01

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D)

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D)



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

14031213324

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)

Report Covering the Period:

From:

01' 01' 2014

To:

03' 31' 2014

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

228276

228276

(ii) Unitemized.....

494712

494712

(iii) TOTAL (add
Lines 11(a)(i) and (ii)).....▶

722988

722988

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACs).....

(d) Total Contributions (add Lines
11(a)(iii), (b), and (c)) (Carry
Totals to Line 33, page 5).....▶

722988

722988

12. Transfers From Affiliated/Other
Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures
(Refunds, Rebates, etc.)
(Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made
to Federal Candidates and Other
Political Committees.....

17. Other Federal Receipts
(Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account
(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)).....▶

722988

722988

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

722988

722988

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) Allocated Federal/Non-Federal Activity (from Schedule H4)

(i) Federal Share

(ii) Non-Federal Share

(b) Other Federal Operating Expenditures

(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))

22. Transfers to Affiliated/Other Party

Committees

28. Contributions to Federal Candidates/Committees and Other Political Committees

24. Independent Expenditures

(use Schedule E)

25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)

26. Loan Repayments Made

27. Loans Made

28. Refunds of Contributions To:

(a) Individuals/Persons Other Than Political Committees

(b) Political Party Committees

(c) Other Political Committees (such as PACs)

(d) Total Contribution Refunds

(add Lines 28(a), (b), and (c))

29. Other Disbursements

30. Federal Election Activity (2 U.S.C. §431(20))

(a) Allocated Federal Election Activity (from Schedule H6)

(i) Federal Share

(ii) "Levin" Share

(b) Federal Election Activity Paid Entirely With Federal Funds

(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))

31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..

32. Total Federal Disbursements

(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)

5521

5521

100000

105521

105521

5521

5521

100000

105521

105521

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003).

Page 5

**III. Net Contributions/Operating Ex-
penditures**

**COLUMN A
Total This Period**

**COLUMN B
Calendar Year-to-Date**

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

7,229.88
0.00
7,229.88
55.21
0.00
55.21

7,229.88
0.00
7,229.88
55.21
0.00
55.21

14031213327

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 1 OF 2
(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 BLUE SHIELD OF NE PAC (BLUEPAC)

Full Name (Last, First, Middle Initial)

A. Martin, Steve, S

Mailing Address

9605 Oak Circle

City

Omaha

State

Ne

Zip Code

68124-2767

FEC ID number of contributing
federal political committee.

C

Name of Employer

Blue Cross Blue Shield Ne

Occupation

President + CEO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.00

Date of Receipt

03 ' 31 ' 2014

Amount of Each Receipt this Period

990.00

Full Name (Last, First, Middle Initial)

B. Twohig, Gretchen, L

Mailing Address

18676 Oregon Circle

City

Elkhorn

State

Ne

Zip Code

68022-3945

FEC ID number of contributing
federal political committee.

C

Name of Employer

Blue Cross Blue Shield Ne

Occupation

Assoc General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.81

Date of Receipt

03 ' 31 ' 2014

Amount of Each Receipt this Period

297.81

Full Name (Last, First, Middle Initial)

C. Waldman, Sarah

Mailing Address

2808 Leigh Ln

City

Papillion

State

Ne

Zip Code

68133-3376

FEC ID number of contributing
federal political committee.

C

Name of Employer

Blue Cross Blue Shield Ne

Occupation

SVP Administration

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.39

Date of Receipt

03 ' 31 ' 2014

Amount of Each Receipt this Period

293.39

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

1,581.20

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

14031213328

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE **2** OF **2**
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)

Full Name (Last, First, Middle Initial)

A. **Kolli, Rama, K**

Mailing Address

2723 N 191st St.

City

Elkhorn

State

Ne

Zip Code

68022-2909

FEC ID number of contributing
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of

Occupation

VP Information Services

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2579.2

Date of Receipt

03 / 31 / 2014

Amount of Each Receipt this Period

2579.2

Full Name (Last, First, Middle Initial)

B. **Trowbridge, Lewis**

Mailing Address

205 S 216th Circle

City

Omaha

State

Ne

Zip Code

68022-1823

FEC ID number of contributing
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of

Occupation

EVP Finance & Administration

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.07

Date of Receipt

03 / 31 / 2014

Amount of Each Receipt this Period

228.07

Full Name (Last, First, Middle Initial)

C. **Filipi, David, H**

Mailing Address

602 S 78th St.

City

Omaha

State

Ne

Zip Code

68114-5456

FEC ID number of contributing
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of

Occupation

VP Qual + Healthcare Oversight

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.57

Date of Receipt

03 / 31 / 2014

Amount of Each Receipt this Period

215.57

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

701.56

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

228.276

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 1 OF 1

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)

Full Name (Last, First, Middle Initial)

Date of Disbursement

02 / 26 / 2014

A.

Smith, Adrian

Mailing Address

3321 Avenue I, Suite 6

City

Scottsbluff

State

Ne

Zip Code

69361

Purpose of Disbursement

Candidate Name

Adrian Smith for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: **Ne**

District:

011
 Category/
 Type

Amount of Each Disbursement this Period

1,000.00

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
 Type

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
 Type

Amount of Each Disbursement this Period

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

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

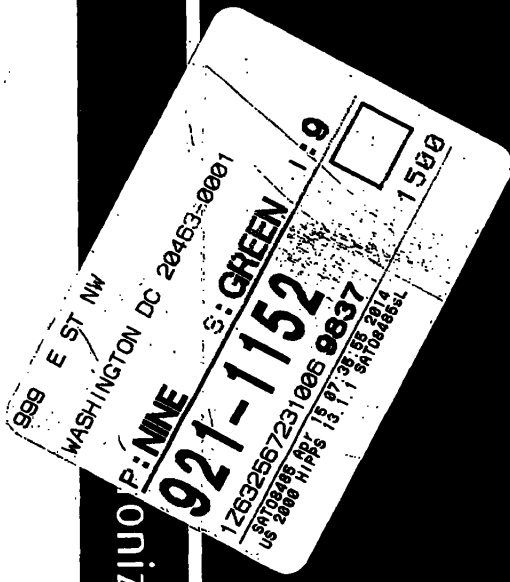
1,000.00

1,000.00

14031213330

Fx FedEx

ionizing the world of commerce



Federal Election Commission
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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <u>UPS</u>	
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<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

QAL
PREPARER
(8/2013)

4/15/14
DATE PREPARED

14031213332