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FEC
FORM 3X

REPORT OF RECEIPTS
AND DISBURSEMENTS
For Other Than An Authorized Committee

1. NAME OF COMMITTEE (In full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines

Blue Shield of California Political Action Committee

ADDRESS (number and street)

50 Beale Street

16th Floor

San Francisco

CA

94105

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00340364

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)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (M13)

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

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

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

01

01

2003

through

03

31

2003

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

Ronald Halroyd

Signature of Treasurer

Electronically Filed by Ronald Halroyd

Date

04

09

2003

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
(Revised 1/2001)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name
Blue Shield of California Political Action Committee

Report Covering the Period: From: To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <input type="text" value="2003"/>		24961.77
(b) Cash on Hand at Beginning of Reporting Period	24961.77	
(c) Total Receipts (from Line 19)	5001.00	5001.00
(d) Subtotal (add lines 6(b) and 8(c) for Column A and Lines 6(a) and 8(c) for Column B)	29962.77	29962.77
7. Total Disbursements (from Line 30)	48.40	48.40
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	29914.37	29914.37
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 20483

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Revised 1/2004)

Page 3

Write or Type Committee Name

Blue Shield of California Political Action Committee

Report Covering the Period: From: MM 01 DD 01 YYYY 2003 To: MM 03 DD 31 YYYY 2003

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	1140.00	
(b) Itemized (use Schedule A)	3861.00	
(c) Unitemized		
(d) TOTAL (add Lines 11(a)(i) and (b))	5001.00	5001.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(i),(b) and (c)) (Carry Totals to Line 32, page 4)	5001.00	5001.00
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 38, page 4)	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 Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	5001.00	5001.00
20. Total Federal Receipts (subtract Line 18 from Line 19)	5001.00	5001.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/2001)

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)	0.00	0.00
(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.....	0.00	0.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(6)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	48.40	48.40
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)..... ▶	48.40	48.40
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)..... ▶	48.40	48.40
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3).....	5001.00	5001.00
33. Total Contribution Refunds (from Line 28(d)).....	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32).....	5001.00	5001.00
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ▶	0.00	0.00
36. Offsets to Operating Expenditures (from Line 16, page 3).....	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)..... ▶	0.00	0.00

2003-03-22 10:00:00 AM

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 517	
	(check only one)			
<input checked="" type="checkbox"/> 11	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be used by any person for the purpose of soliciting contributions (i) 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 Shield of California Political Action Committee

Full Name (Last, First, Middle Initial) A. David Power		Date of Receipt 03 20 2003
Mailing Address 50 Beale Street City San Francisco		Amount of Each Receipt this Period 240.00
State CA	Zip Code 94105	
FEC ID number of contributing federal political committee		\$40 bi-weekly payroll deduction
Name of Employer Blue Shield of California		
Occupation Chief Information Officer		Transaction ID: SA11A1.5872
Aggregate Year-to-Date 240.00		
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Lyle Swallow		Date of Receipt 03 20 2003
Mailing Address 5235 Myrtle Drive City Concord		Amount of Each Receipt this Period 240.00
State CA	Zip Code 94521	
FEC ID number of contributing federal political committee		\$40 bi-weekly payroll deduction
Name of Employer Blue Shield of California		
Occupation Associate General Counsel		Transaction ID: SA11A1.5926
Aggregate Year-to-Date 240.00		
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Paul Swanson		Date of Receipt 03 20 2003
Mailing Address 131 La Salle Avenue City Fremont		Amount of Each Receipt this Period 360.00
State CA	Zip Code 94610	
FEC ID number of contributing federal political committee		\$60 bi-weekly payroll deduction
Name of Employer Blue Shield of California		
Occupation Chief Financial Officer		Transaction ID: SA11A1.5829
Aggregate Year-to-Date 360.00		
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	840.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE 6 / 7	
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	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 Shield of California Political Action Committee

Full Name (Last, First, Middle Initial) A. Kenneth Wood		Date of Receipt 03 / 20 / 2003	
Mailing Address 50 Beale Street City San Francisco		State Zip Code CA 94105	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 300.00	
Name of Employer Blue Shield of California		Occupation Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼		\$50 bi-weekly payroll deduction Aggregate Year-to-Date ▼ 300.00	
		Transaction ID: SA11A1.5934	

B.

C.

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	1140.00

2003-03-20 10:00:00 AM 23038033332

**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 7 / 7
	<input type="checkbox"/> 21b 2b	<input type="checkbox"/> 22 27	<input type="checkbox"/> 23 28a	<input type="checkbox"/> 24 28b	<input type="checkbox"/> 25 28c	<input checked="" type="checkbox"/> 26	

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NAME OF COMMITTEE (In Full)
Blue Shield of California Political Action Committee

Full Name (Last, First, Middle Initial)
A. Fees Bank

Mailing Address	P.O. Box 27128		Date of Disbursement
Bank of America	State	Zip Code	MM / DD / YY
City	CA	94520	01 / 31 / 2003
Concord			Amount of Each Disbursement this Period
Purpose of Disbursement			15.09
Candidate Name		Category/Type	
Office Sought: House Senate President		Disbursement For: Primary General Other (specify) ▼	
State: District:			Transaction ID: SB29.5936

Full Name (Last, First, Middle Initial)
B. Fees Bank

Mailing Address	P.O. Box 27128		Date of Disbursement
Bank of America	State	Zip Code	MM / DD / YY
City	CA	94520	02 / 26 / 2003
Concord			Amount of Each Disbursement this Period
Purpose of Disbursement			18.30
Candidate Name		Category/Type	
Office Sought: House Senate President		Disbursement For: Primary General Other (specify) ▼	
State: District:			Transaction ID: SB29.5937

Full Name (Last, First, Middle Initial)
C. Fees Bank

Mailing Address	P.O. Box 27128		Date of Disbursement
Bank of America	State	Zip Code	MM / DD / YY
City	CA	94520	03 / 31 / 2003
Concord			Amount of Each Disbursement this Period
Purpose of Disbursement			15.01
Candidate Name		Category/Type	
Office Sought: House Senate President		Disbursement For: Primary General Other (specify) ▼	
State: District:			Transaction ID: SB29.5938

SUBTOTAL of Disbursements This Page (optional)	40.40
TOTAL This Period (last page this line number only)	48.40

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 4/10/03
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>JA</i> PREPARER	4/10/03 DATE PREPARED

2003-04-10 10:00:00 AM