

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Blue Cross Blue Shield of Alabama PAC

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="2016"/>	<input type="text" value="153899.48"/>	<input type="text" value="153899.48"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="149625.40"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="627.26"/>	<input type="text" value="62353.18"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="150252.66"/>	<input type="text" value="216252.66"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="32500.00"/>	<input type="text" value="98500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="117752.66"/>	<input type="text" value="117752.66"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Blue Cross Blue Shield of Alabama PAC

Report Covering the Period: From: / / To: / /

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).....	626.26	55250.48
(ii) Unitemized	1.00	7102.70
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	627.26	62353.18
(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)	627.26	62353.18
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 Transfers (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)).....▶	627.26	62353.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	627.26	62353.18

DETAILED SUMMARY PAGE
of Disbursements

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	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	12000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	32500.00	86500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	32500.00	98500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32500.00	98500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	627.26	62353.18
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	627.26	62353.18
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: (check only one)	PAGE 6 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC

A. Echols, Molly, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 North Jackson St
 City Montgomery State AL Zip Code 36104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS of AL Occupation (for Individual) Dept Mgr Internal Audit
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 337.26

Date of Receipt 10 / 19 / 2016
Transaction ID : PR122928025590
 Amount of Each Receipt this Period 16.06
 Memo Item
 P/R Deduction (\$16.06 Bi-Weekly)

B. Barth, John, Walter, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 Erwin Cir
 City Birmingham State AL Zip Code 35216-1718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Dept Mgr Cust Serv
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 284.97

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78825325590
 Amount of Each Receipt this Period 13.57
 Memo Item
 P/R Deduction (\$13.57 Bi-Weekly)

C. Berkery, Jonathan, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703 Morris Blvd
 City Birmingham State AL Zip Code 35209-6223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Application Dev Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 324.66

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78825425590
 Amount of Each Receipt this Period 15.46
 Memo Item
 P/R Deduction (\$15.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	45.09
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC

A. Bonner, Laura, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 Cambo Ter
 City Birmingham State AL Zip Code 35226-1078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Dept Mgr Enrollment Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 19 / 2016
Transaction ID : PR7882552590
 Amount of Each Receipt this Period 20.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

B. Bruner, William, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 812 Hickory Trace Cir
 City Birmingham State AL Zip Code 35244-4545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) District Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 358.26

Date of Receipt 10 / 19 / 2016
Transaction ID : PR7882602590
 Amount of Each Receipt this Period 17.06
 Memo Item
 P/R Deduction (\$17.06 Bi-Weekly)

C. Byrd, Richard, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3713 Tudor Ln
 City Mobile State AL Zip Code 36608-1526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Account Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 519.54

Date of Receipt 10 / 19 / 2016
Transaction ID : PR7882622590
 Amount of Each Receipt this Period 24.74
 Memo Item
 P/R Deduction (\$24.74 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	61.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 20
	<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 Blue Shield of Alabama PAC

A. Dinsmore, William, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1921 Forest Knoll Dr
 City Birmingham State AL Zip Code 35244-1431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Manager Database Admin
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78827325590
 Amount of Each Receipt this Period 15.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

B. Finley, Shirley, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4221 Waterford Ln
 City Trussville State AL Zip Code 35173-1567
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Health Management Dept Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.87

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78828025590
 Amount of Each Receipt this Period 16.47
 Memo Item
 P/R Deduction (\$16.47 Bi-Weekly)

C. Hamlin, Elizabeth, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 361343
 City Birmingham State AL Zip Code 35236-1343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Director Associate Services
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 379.68

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78828425590
 Amount of Each Receipt this Period 18.08
 Memo Item
 P/R Deduction (\$18.08 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	49.55
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 9 OF 20
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC

A. Harrison, Harold, Wayne, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 Walnut Cir
 City Alabaster State AL Zip Code 35007-9300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Dept Mgr Health Care Networks
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 354.69

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78828625590
 Amount of Each Receipt this Period 16.89
 Memo Item
 P/R Deduction (\$16.89 Bi-Weekly)

B. Heaton, Sharon, Rothe, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2605 Old Woodstock Trl
 City Birmingham State AL Zip Code 35216-5807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Manager Claims Processing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.52

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78828825590
 Amount of Each Receipt this Period 17.12
 Memo Item
 P/R Deduction (\$17.12 Bi-Weekly)

C. Herringdon, Sheila, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 fox valley highlands cr
 City Maylene State AL Zip Code 35114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Dir Quality Mngmnt Plan Perfor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78829025590
 Amount of Each Receipt this Period 20.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	54.01
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: (check only one)	PAGE 10 OF 20
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC

A. Johnson, David, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2508 wilowbrook cr
 City Birmingham State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Strategy Consult Technical Adv
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 378.00

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78829425590
 Amount of Each Receipt this Period 18.00
 Memo Item
 P/R Deduction (\$18.00 Bi-Weekly)

B. Kenney, Brian, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3874 Village Center Dr
 City Birmingham State AL Zip Code 35226-6263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Health Mgmt Operations Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78829725590
 Amount of Each Receipt this Period 10.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

C. Kohn, Francis, Hill, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2226 English Village Ln
 City Birmingham State AL Zip Code 35223-1731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Account Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 447.51

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78830125590
 Amount of Each Receipt this Period 21.31
 Memo Item
 P/R Deduction (\$21.31 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	49.31
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 20
<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 Blue Shield of Alabama PAC

A. Latta, Michael, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2616 greenmont cr
 City Birmingham State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) BESt Execution, Dept Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 367.92

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78830225590
 Amount of Each Receipt this Period 17.52
 Memo Item
 P/R Deduction (\$17.52 Bi-Weekly)

B. Lyda, John, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3484 Tamassee Ln
 City Birmingham State AL Zip Code 35226-2671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Manager Claims Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78830625590
 Amount of Each Receipt this Period 15.00
 Memo Item
 P/R Deduction (\$15.00 Bi-Weekly)

C. McMahan, Kenneth, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5622 Highway 55
 City Wilsonville State AL Zip Code 35186-6556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Dept Mgr Technology Support
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78831125590
 Amount of Each Receipt this Period 10.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	42.52
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: (check only one)	PAGE 12 OF 20
	<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 Blue Shield of Alabama PAC

A. Morris, Joe, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 908 Lakeview Estates Dr
 City Bessemer State AL Zip Code 35023-5810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Director Facilities Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 393.96

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78831525590
 Amount of Each Receipt this Period 18.76
 Memo Item
 P/R Deduction (\$18.76 Bi-Weekly)

B. Morrissette, John, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 Amherst Cir
 City Birmingham State AL Zip Code 35216-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Mgr Sales Sup/Nat'l Accts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78831625590
 Amount of Each Receipt this Period 25.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

C. Parton, Christopher, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 Creekwood Ln
 City Helena State AL Zip Code 35080-3273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Director Info Security/CISO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78831925590
 Amount of Each Receipt this Period 20.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	63.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 20
<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 Blue Shield of Alabama PAC

A. Platt, David, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3700 Montevallo Rd S
 City Birmingham State AL Zip Code 35213-4208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Mgr Account Executive Program
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 512.82

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78832125590
 Amount of Each Receipt this Period 24.42
 Memo Item
 P/R Deduction (\$24.42 Bi-Weekly)

B. Rumph, Sandra, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5448 Scout Creek Dr
 City Birmingham State AL Zip Code 35244-3936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Health Management Dept Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 453.81

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78832325590
 Amount of Each Receipt this Period 21.61
 Memo Item
 P/R Deduction (\$21.61 Bi-Weekly)

C. Sellers, Bobby, Ray, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 319 Chestnut Ln
 City Alabaster State AL Zip Code 35007-8537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Application Dev Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 498.54

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78832925590
 Amount of Each Receipt this Period 23.74
 Memo Item
 P/R Deduction (\$23.74 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	69.77
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC

A. Sellers, Spencer, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5568 Surrey Ln
 City Birmingham State AL Zip Code 35242-3330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) U/Mgr Enterprise Content Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78833025590
 Amount of Each Receipt this Period 10.00
 Memo Item
 P/R Deduction (\$10.00 Bi-Weekly)

B. Smith, Mary, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5440 Magnolia Trce
 City Birmingham State AL Zip Code 35244-4533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Director Treasury Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 402.36

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78833225590
 Amount of Each Receipt this Period 19.16
 Memo Item
 P/R Deduction (\$19.16 Bi-Weekly)

C. Steed, Clay, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 334 Lennox Sq
 City Fairhope State AL Zip Code 36532-7519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Account Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 295.47

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78833325590
 Amount of Each Receipt this Period 14.07
 Memo Item
 P/R Deduction (\$14.07 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	43.23
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: (check only one)	PAGE 15 OF 20
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC

A. Sullivan, Christine, V, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2058 Wild Flower Dr
 City Birmingham State AL Zip Code 35244-1723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Account Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78833725590
 Amount of Each Receipt this Period 16.00
 Memo Item
 P/R Deduction (\$16.00 Bi-Weekly)

B. Sultis, Chris, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 N Village Dr
 City Gardendale State AL Zip Code 35071-4706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) U/Mgr Server Engineering
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78833825590
 Amount of Each Receipt this Period 20.00
 Memo Item
 P/R Deduction (\$20.00 Bi-Weekly)

c. Syphurs, Jeffrey, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 318 Bedford Ave
 City Birmingham State AL Zip Code 35226-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Manager Claims Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 342.51

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78833925590
 Amount of Each Receipt this Period 16.31
 Memo Item
 P/R Deduction (\$16.31 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	52.31
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 16 OF 20
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC

A. Walden, Joseph, Clay, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Signal Hill Rd
 City Spanish Fort State AL Zip Code 36527-3138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) District Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 447.51

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78834525590
 Amount of Each Receipt this Period 21.31
 Memo Item
 P/R Deduction (\$21.31 Bi-Weekly)

B. Warren, Susan, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2021 Chandapine Cir
 City Pelham State AL Zip Code 35124-1430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Dept Mgr Corporate Strategy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 397.32

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78834725590
 Amount of Each Receipt this Period 18.92
 Memo Item
 P/R Deduction (\$18.92 Bi-Weekly)

C. Watkins, James, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1935 Red Oak Ln NE
 City Arab State AL Zip Code 35016-5360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) District Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.05

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78834825590
 Amount of Each Receipt this Period 19.05
 Memo Item
 P/R Deduction (\$19.05 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	59.28
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 20
	<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 Blue Shield of Alabama PAC

A. Whitehead, Ronald, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1009 Margaret St
 City Leeds State AL Zip Code 35094-2736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) HBS CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 503.01

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78834925590
 Amount of Each Receipt this Period 21.87
 Memo Item
 P/R Deduction (\$21.87 Bi-Weekly)

B. Williams, John, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8625 Anna PI
 City Montgomery State AL Zip Code 36116-6693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) District Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.96

Date of Receipt 10 / 19 / 2016
Transaction ID : PR78835025590
 Amount of Each Receipt this Period 13.76
 Memo Item
 P/R Deduction (\$13.76 Bi-Weekly)

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	35.63
TOTAL This Period (last page this line number only).....	626.26

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 Blue Shield of Alabama PAC

Full Name (Last, First, Middle Initial)

A. Terri PAC - Together Everyone Realizes Real Impact

Date of Disbursement

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

Mailing Address 499 S Capitol St
Suite 422

City Washington State DC Zip Code 20003

Purpose of Disbursement
Direct Contribution

011
Category/ Type

FEC Identification Number

C	C00525030
---	-----------

Transaction ID : 10135985

Amount of Each Disbursement this Period

5000.00

Direct Contribution

Memo Item

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. BYRNE PAC

Date of Disbursement

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

Mailing Address PO BOX 3723

City MONTGOMERY State AL Zip Code 36109

Purpose of Disbursement
Direct Contribution

011
Category/ Type

FEC Identification Number

C	C00559633
---	-----------

Transaction ID : 10135986

Amount of Each Disbursement this Period

5000.00

Direct Contribution

Memo Item

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. Martha PAC

Date of Disbursement

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

Mailing Address 1006 Pendleton St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Direct Contribution

011
Category/ Type

FEC Identification Number

C	C00527309
---	-----------

Transaction ID : 10135987

Amount of Each Disbursement this Period

5000.00

Direct Contribution

Memo Item

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

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

15000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 Blue Shield of Alabama PAC

Full Name (Last, First, Middle Initial) A. Make Opportunity PAC		Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 18 / 2016	
Mailing Address 7610 Foxfire Dr SE		FEC Identification Number C 00524611 Transaction ID : 10136995 Amount of Each Disbursement this Period 5000.00 Direct Contribution <input type="checkbox"/> Memo Item	
City Huntsville	State AL	Zip Code 35802	Category/ Type 011
Purpose of Disbursement Direct Contribution		Candidate Name Make Opportunity PAC	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Conservative Promises PAC		Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 18 / 2016	
Mailing Address 1919 Oxmoor Rd Suite 241		FEC Identification Number C 00585893 Transaction ID : 10137018 Amount of Each Disbursement this Period 5000.00 Direct Contribution <input type="checkbox"/> Memo Item	
City Homewood	State AL	Zip Code 35209	Category/ Type 011
Purpose of Disbursement Direct Contribution		Candidate Name Conservative Promises PAC	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. American Security PAC		Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 18 / 2016	
Mailing Address 167 West Manor Lane		FEC Identification Number C Transaction ID : 10138259 Amount of Each Disbursement this Period 5000.00 Direct Contribution <input type="checkbox"/> Memo Item	
City Alexandria	State AL	Zip Code 36250	Category/ Type 011
Purpose of Disbursement Direct Contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

15000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 Blue Shield of Alabama PAC

Full Name (Last, First, Middle Initial)

A. Reaching for a Brighter America PAC

Mailing Address PO Box 15709

City Washington State DC Zip Code 20003

Purpose of Disbursement
Direct Contribution

Category/
Type

Candidate Name
Reaching for a Brighter America PAC

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y
10 / 18 / 2016

FEC Identification Number
C C00487942
Transaction ID : 10138262
Amount of Each Disbursement this Period
2500.00
Direct Contribution

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y

FEC Identification Number
C
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y

FEC Identification Number
C
Amount of Each Disbursement this Period

Memo Item

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

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

2500.00
32500.00