

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEC MAIL ROOM

2001 APR 11 7 12:18

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 50 BEALE STREET	2. FEC IDENTIFICATION NUMBER C00340364
CITY, STATE and ZIP CODE SAN FRANCISCO, CA 94105-1805	3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## 4. TYPE OF REPORT

(a)  April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

July 31 Mid Year Report (Non-election Year Only)

Termination Report

Monthly Report Due On:

- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20  |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20    | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20      | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31  |

12-Day Pre-Election Report for the \_\_\_\_\_  
(Type of Election)

election on \_\_\_\_\_ in the State of \_\_\_\_\_

30-Day Post-Election Report following the General Election

on \_\_\_\_\_ in the State of \_\_\_\_\_

(b) Is this Report an Amendment?  YES  NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	11/26/00 through 12/31/00		
6. (a)	Cash on Hand January 1, 2000		\$ 2,751.82
(b)	Cash on Hand at Beginning of Reporting Period	\$ 7,462.25	
(c)	Total Receipts (from Line 19)	\$ 1,227.00	\$ 11,504.00
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 8,689.25	\$ 14,255.82
7.	Total Disbursements (from Line 30)	\$ 1,000.00	\$ 6,566.57
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 7,689.25	\$ 7,689.25
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 969 E Street, NW Washington, DC 20469 Toll Free 800-424-9530 Local 202-684-1100
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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 B. HOLROYD	Date 4/4/01
Signature of Treasurer <i>Ronald B. Holroyd</i>	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS  
PAGE 2, FEC FORM 3X**

(revised 1/1/81)

NAME OF COMMITTEE BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE		REPORT COVERING PERIOD FROM 11/26/00 TO 12/31/00	
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	400.00	4,170.00	11(a)(i)
ii. Unitemized	827.00	5,334.00	11(a)(ii)
iii. Total (add i and ii) >	1,227.00	9,504.00	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) >	1,227.00	9,504.00	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		2,000.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	1,227.00	11,504.00	19
20. Total Federal Receipts (subtract line 18 from line 19) >	1,227.00	11,504.00	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >			21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,000.00	6,500.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees		5.00	28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >		5.00	28(d)
29. Other Disbursements		61.57	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	1,000.00	6,566.57	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	1,000.00	6,566.57	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	1,227.00	9,504.00	32
33. Total Contribution Refunds (from line 28d)		5.00	33
34. Net Contributions (other than loans)(subtract line 33 from line 32)	1,227.00	9,499.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from line 35) >			37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 2

FOR LINE NUMBER 11(a)(1)

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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BONNIE BELAND 5036 PRINCESS ANNE LA CANADA, FLINTRIDGE, CA 91011	BLUE SHIELD OF CALIFORNIA	12/8/00	\$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): UNSPECIFIED	Occupation VICE PRESIDENT	Aggregate Year-to-Date > \$ 290.00	
BRUCE BODAKEN 18 TURTLE ROCK COURT TIBURON, CA 94920	BLUE SHIELD OF CALIFORNIA	12/8/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): UNSPECIFIED	Occupation CHAIRMAN, CEO PRESIDENT	Aggregate Year-to-Date > \$ 725.00	
PATRICIA BOONE 229 VIA PINADA LANE MARTINEZ, CA 94553	BLUE SHIELD OF CALIFORNIA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): UNSPECIFIED	Occupation SENIOR VP HUMAN RESOURCES	Aggregate Year-to-Date > \$ 500.00	
DAVID BOWEN 281 EAGLE TRACE DRIVE HALFMOON BAY, CA 94019	BLUE SHIELD OF CALIFORNIA	12/8/00	\$80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): UNSPECIFIED	Occupation SENIOR VP & CHIEF INFO OFFICER	Aggregate Year-to-Date > \$ 280.00	
CARROL CEDERBURG 9153 SHADY HOLLOW FAIR OAKS, CA 95628	BLUE SHIELD OF CALIFORNIA	12/8/00	\$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): UNSPECIFIED	Occupation MEDICAL DIRECTOR NORTHERN CALIFORNIA	Aggregate Year-to-Date > \$ 290.00	
RITCH EICH 17 LUPINE AVENUE SAN FRANCISCO, CA 94118	BLUE SHIELD OF CALIFORNIA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): UNSPECIFIED	Occupation DIRECTOR PUBLIC RELATIONS	Aggregate Year-to-Date > \$ 500.00	
JAMES ENGLISH 1707 PORT SHEFFIELD NEWPORT BEACH, CA 92660	BLUE SHIELD OF CALIFORNIA	12/8/00	\$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): UNSPECIFIED	Occupation VICE PRESIDENT SALES FOR SOUTHERN, CA	Aggregate Year-to-Date > \$ 290.00	

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

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 2  
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
PAMELA JOHNSON 156 MADISON AVENUE SAN BRUNO, CA 94066	BLUE SHIELD OF CALIFORNIA Occupation DIRECTOR HEALTH SERVICES BUSINESS	12/8/00	\$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): UNSPECIFIED	Aggregate Year-to-Date > \$ 290.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ALAN PUZARNE 4401 ELDER AVENUE SEAL BEACH, CA 90740	BLUE SHIELD OF CALIFORNIA Occupation SENIOR VP PRESIDENT, CBU	12/8/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): UNSPECIFIED	Aggregate Year-to-Date > \$ 725.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JOHN SCHNERIN 3113 RAINTREE CIRCLE CULVER CITY, CA 90230	BLUE SHIELD OF CALIFORNIA Occupation DIRECTOR PROVIDER RELATIONS	12/8/00	\$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): UNSPECIFIED	Aggregate Year-to-Date > \$ 290.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
PAUL SWENSON 131 LASALLE AVENUE PIEDMONT, CA 94611	BLUE SHIELD OF CALIFORNIA Occupation EXECUTIVE VICE PRESIDENT, CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): UNSPECIFIED	Aggregate Year-to-Date > \$ 1,500.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
LARRY TALLMAN 472 30TH STREET MANHATTAN BEACH, CA 90266	BLUE SHIELD OF CALIFORNIA Occupation VICE PRESIDENT NATIONAL ACCOUNTS FOR CBU	12/8/00	\$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): UNSPECIFIED	Aggregate Year-to-Date > \$ 290.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
KENNETH WOOD 240 HIGHLAND AVE SAN RAFAEL, CA 94901	BLUE SHIELD OF CALIFORNIA Occupation EXECUTIVE VICE PRESIDENT & COO	12/8/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): UNSPECIFIED	Aggregate Year-to-Date > \$ 350.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

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

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

\$400.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 23

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CONGRESSMAN DOOLEY C/O JAMES WISE TREASURER P.O. BOX 1367 VISALIA, CA 93279	CONGRESS DOOLEY U.S. CONGRESS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/29/00	\$1,000.00
<del>B. Full Name, Mailing Address and ZIP Code</del>	<del>Purpose of Disbursement</del>	<del>Date (month, day, year)</del>	<del>Amount of Each Disbursement This Period</del>
<del>C. Full Name, Mailing Address and ZIP Code</del>	<del>Purpose of Disbursement</del>	<del>Date (month, day, year)</del>	<del>Amount of Each Disbursement This Period</del>
<del>D. Full Name, Mailing Address and ZIP Code</del>	<del>Purpose of Disbursement</del>	<del>Date (month, day, year)</del>	<del>Amount of Each Disbursement This Period</del>
<del>E. Full Name, Mailing Address and ZIP Code</del>	<del>Purpose of Disbursement</del>	<del>Date (month, day, year)</del>	<del>Amount of Each Disbursement This Period</del>
<del>F. Full Name, Mailing Address and ZIP Code</del>	<del>Purpose of Disbursement</del>	<del>Date (month, day, year)</del>	<del>Amount of Each Disbursement This Period</del>
<del>G. Full Name, Mailing Address and ZIP Code</del>	<del>Purpose of Disbursement</del>	<del>Date (month, day, year)</del>	<del>Amount of Each Disbursement This Period</del>
<del>H. Full Name, Mailing Address and ZIP Code</del>	<del>Purpose of Disbursement</del>	<del>Date (month, day, year)</del>	<del>Amount of Each Disbursement This Period</del>
<del>I. Full Name, Mailing Address and ZIP Code</del>	<del>Purpose of Disbursement</del>	<del>Date (month, day, year)</del>	<del>Amount of Each Disbursement This Period</del>

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

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

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 <i>4-11-01</i>
<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>JMN</i> PREPARER	<i>4-11-01</i> DATE PREPARED