

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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 17-C356 SAN FRANCISCO CA 94105 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00340364 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 11 25 2008 through 12 31 2008

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 Karman Chan

Signature of Treasurer Electronically Filed by Karman Chan Date 01 30 2009

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

Table with 8 columns and 1 row for 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		65707.70
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	74476.58									
(c) Total Receipts (from Line 19)	8604.25	106601.08								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	83080.83	172308.78								
7. Total Disbursements (from Line 31)	1033.28	90261.23								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	82047.55	82047.55								
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 20463

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	7549.75	74135.63
(i) Itemized (use Schedule A)	1054.50	32465.45
(ii) Unitemized	8604.25	106601.08
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	8604.25	106601.08
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 Transfer (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))	8604.25	106601.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	8604.25	106601.08

DETAILED SUMMARY PAGE
of Disbursements

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)		
(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.....	1000.00	90000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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.....	33.28	261.23
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	1033.28	90261.23
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1033.28	90261.23

DETAILED SUMMARY PAGE
of Disbursements

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)	8604.25	106601.08
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8604.25	106601.08
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: PAGE 6 / 55
(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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Salim Alama

Mailing Address 116125
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8914
Amount of Each Receipt this Period 50.00
Payroll contribution per cycle \$25.00

B. Full Name (Last, First, Middle Initial)
Kenneth Sean Allen

Mailing Address emp 109049
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8915
Amount of Each Receipt this Period 40.00
Payroll contribution per cycle \$20

C. Full Name (Last, First, Middle Initial)
Dennis Alva

Mailing Address emp 109311
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 494.77

Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8916
Amount of Each Receipt this Period 38.34
Payroll contribution per cycle \$19.17

SUBTOTAL of Receipts This Page (optional) ► 128.34

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 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) David A Arnold Jr.	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 114648 50 Beale Street	Transaction ID: SA11AI.8918
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Occupation Blue Shield Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) Tanya Ballow	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 108347 50 Beale Street	Transaction ID: SA11AI.8921
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Occupation Blue Shield of California employee # 108347	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

C.	Full Name (Last, First, Middle Initial) Bret Balousek	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 115527 50 Beale Street	Transaction ID: SA11AI.8922
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$15
	Name of Employer Occupation Blue Shield of California employee # 115527	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional)	125.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 55
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Patrick Banghart

Mailing Address 115427
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8923
Amount of Each Receipt this Period 20.00
Payroll contribution per cycle \$10.00

B. Full Name (Last, First, Middle Initial)
Tracy Barnes

Mailing Address emp 22076
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8924
Amount of Each Receipt this Period 30.00
Payroll contribution per cycle \$15.00

C. Full Name (Last, First, Middle Initial)
Vivek Bhatia

Mailing Address emp 113173
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8927
Amount of Each Receipt this Period 20.00
Payroll contribution per cycle \$10.00

SUBTOTAL of Receipts This Page (optional) ▶ 70.00

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 / 55
(check only one)

<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Douglas Biehn

Mailing Address emp 112903, 50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.8928

Amount of Each Receipt this Period
40.00

Payroll contribution per cycle \$20.00

B.

Full Name (Last, First, Middle Initial)
Bruce Bodaken

Mailing Address emp 16451
50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.8929

Amount of Each Receipt this Period
120.00

Payroll contribution per cycle \$60.00

C.

Full Name (Last, First, Middle Initial)
Shirley Bolden

Mailing Address emp 016540, 50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.12

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.8930

Amount of Each Receipt this Period
19.24

Payroll contribution per cycle \$9.62

SUBTOTAL of Receipts This Page (optional) ► **179.24**

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 10 / 55
(check only one)

<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Thomas Borchelt		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 115465 50 Beale Street		Transaction ID: SA11AI.8931
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$22.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

B.

Full Name (Last, First, Middle Initial) John Bradley		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 114962 50 Beale Street		Transaction ID: SA11AI.8933
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.

Full Name (Last, First, Middle Initial) Ruta Britts		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 112060 50 Beale Street		Transaction ID: SA11AI.8934
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Blue Shield	Occupation employee	Payroll contribution per cycle \$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	105.00
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 11 / 55
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Linda Bronson
 Mailing Address emp 114382, 50 Beale Street
 City State Zip Code
 San Francisco CA 94105
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 8
Transaction ID: SA11AI.8936
 Amount of Each Receipt this Period
 30.00
 Payroll contribution per cycle \$15.00
 Name of Employer Occupation
 Blue Cross employee
 FEC ID number of contributing federal political committee. **C**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 390.00

B. Full Name (Last, First, Middle Initial)
 Thomas Brophy
 Mailing Address emp 114076, 50 Beale Street
 City State Zip Code
 San Francisco CA 94105
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 8
Transaction ID: SA11AI.8937
 Amount of Each Receipt this Period
 40.00
 Payroll contribution per cycle \$20.00
 Name of Employer Occupation
 Blue Cross employee
 FEC ID number of contributing federal political committee. **C**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 520.00

C. Full Name (Last, First, Middle Initial)
 William Brown
 Mailing Address emp 059004, 50 Beale Street
 City State Zip Code
 San Francisco CA 94105
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 8
Transaction ID: SA11AI.8938
 Amount of Each Receipt this Period
 46.88
 Payroll contribution per cycle \$23.44
 Name of Employer Occupation
 Blue Shield employee
 FEC ID number of contributing federal political committee. **C**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 602.84

SUBTOTAL of Receipts This Page (optional) ► **116.88**
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 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Michael-Anne Browne		Date of Receipt
	Mailing Address emp 111514 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 12 / 31 / 2008
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8939
Name of Employer Blue Shield of California		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00	50.00
		Payroll contribution per cycle \$25.00	

B.	Full Name (Last, First, Middle Initial) Sue Burke		Date of Receipt
	Mailing Address 054016 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 12 / 31 / 2008
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8940
Name of Employer Blue Shield of California		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	20.00
		Payroll contribution per cycle \$10.00	

C.	Full Name (Last, First, Middle Initial) Michele Carrillo		Date of Receipt
	Mailing Address emp 112162, 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 12 / 31 / 2008
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8942
Name of Employer Blue Shield		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	20.00
		Payroll contribution per cycle \$10.00	

SUBTOTAL of Receipts This Page (optional)	90.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 55

(check only one)

<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Wendy Cerruti		Date of Receipt MM / DD / YYYY 12 / 31 / 2008		
	Mailing Address emp 112821, 50 Beale Street		Transaction ID: SA11AI.8944		
	City San Francisco	State CA	Zip Code 94105	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$50.00		
	Name of Employer Blue Shield	Occupation employee	Aggregate Year-to-Date ▼ 1250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) George R. Chadwell		Date of Receipt MM / DD / YYYY 12 / 31 / 2008		
	Mailing Address emp 110628 50 Beale Street		Transaction ID: SA11AI.8945		
	City San Francisco	State CA	Zip Code 94105	Amount of Each Receipt this Period 26.88	
	FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$13.44		
	Name of Employer Blue Shield of California	Occupation Employee	Aggregate Year-to-Date ▼ 347.49		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Deborah Chase		Date of Receipt MM / DD / YYYY 12 / 31 / 2008		
	Mailing Address emp 114029, 50 Beale Street		Transaction ID: SA11AI.8946		
	City San Francisco	State CA	Zip Code 94105	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$20.00		
	Name of Employer Blue Shield	Occupation employee	Aggregate Year-to-Date ▼ 520.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	▶	166.88
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 14 / 55
(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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Denise Ciuffo

Mailing Address emp 054063, 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt MM / DD / YYYY 12 / 31 / 2008

Transaction ID: SA11AI.8947

Amount of Each Receipt this Period 20.00

Payroll contribution per cycle \$10.00

B. Full Name (Last, First, Middle Initial)
Bruce Cohen

Mailing Address emp 095327, 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt MM / DD / YYYY 12 / 31 / 2008

Transaction ID: SA11AI.8948

Amount of Each Receipt this Period 40.00

Payroll contribution per cycle \$20.00

C. Full Name (Last, First, Middle Initial)
Vincent Coppola

Mailing Address 115946 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt MM / DD / YYYY 12 / 31 / 2008

Transaction ID: SA11AI.8950

Amount of Each Receipt this Period 60.00

Payroll contribution per cycle \$30.00

SUBTOTAL of Receipts This Page (optional) ► 120.00

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 15 / 55
(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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Edward Cymerys

Mailing Address emp 114609, 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8952
Amount of Each Receipt this Period 200.00
Payroll contribution per cycle \$100.00

B. Full Name (Last, First, Middle Initial)
Susan Deleeuw

Mailing Address 114798
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8955
Amount of Each Receipt this Period 45.00
Payroll contribution per cycle \$22.50

C. Full Name (Last, First, Middle Initial)
Ann DeRose

Mailing Address 113203
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8956
Amount of Each Receipt this Period 45.00
Payroll contribution per cycle \$22.50

SUBTOTAL of Receipts This Page (optional) ► 290.00

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 / 55
(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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Tushar Desai

Mailing Address 115087
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8957
Amount of Each Receipt this Period 45.00
Payroll contribution per cycle \$22.50

B. Full Name (Last, First, Middle Initial)
James DiFalco

Mailing Address 112748
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8958
Amount of Each Receipt this Period 20.00
Payroll contribution per cycle \$10.00

C. Full Name (Last, First, Middle Initial)
Patricia R. Domenickine

Mailing Address emp 111504
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 679.11

Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.8959
Amount of Each Receipt this Period 52.72
Payroll contribution per cycle \$26.36

SUBTOTAL of Receipts This Page (optional) ► 117.72

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 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Marjorie Drake		Date of Receipt
	Mailing Address emp 56271 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8963
Name of Employer Blue Shield of California		Occupation IFP Underwriting	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text"/> 20.00
		Payroll contribution per cycle \$10.00	

B.	Full Name (Last, First, Middle Initial) James Elliott		Date of Receipt
	Mailing Address 115549 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8964
Name of Employer Blue Shield of California		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2600.00	<input type="text"/> 200.00
		Payroll contribution per cycle \$100.00	

C.	Full Name (Last, First, Middle Initial) Thomas Epstein		Date of Receipt
	Mailing Address emp 110249 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8966
Name of Employer Blue Shield of California		Occupation Vice President, Public Affairs	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1560.00	<input type="text"/> 120.00
		Payroll contribution per cycle \$60.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 340.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 18 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Jacqueline Espinoza	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 115623 50 Beale Street	Transaction ID: SA11AI.8967
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Blue Shield of California Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 585.00	

B.	Full Name (Last, First, Middle Initial) Kathryn M. Ferguson	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 32319 50 Beale Street	Transaction ID: SA11AI.8968
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 34.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$17.00
	Name of Employer Blue Shield of California Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 420.00	

C.	Full Name (Last, First, Middle Initial) Carol Fogelman	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 32239 50 Beale Street	Transaction ID: SA11AI.8969
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 26.06
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$13.03
	Name of Employer Blue Shield of California Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 308.93	

SUBTOTAL of Receipts This Page (optional)	105.06
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 19 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Joseph Foley	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 114742 50 Beale Street	Transaction ID: SA11AI.8970
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 23.80
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$11.90
	Name of Employer Occupation Blue Shield of California employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 309.51	

B.	Full Name (Last, First, Middle Initial) George A Gardner	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 115931 50 Beale Street	Transaction ID: SA11AI.8971
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Occupation Blue Shield Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

C.	Full Name (Last, First, Middle Initial) Mark Gastineau	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 115296 50 Beale Street	Transaction ID: SA11AI.8972
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$40.00
	Name of Employer Occupation Blue Shield of California employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1040.00	

SUBTOTAL of Receipts This Page (optional)	153.80
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 20 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Robert Geyer	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 42026 50 Beale Street	Transaction ID: SA11AI.8975
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$40.00
	Name of Employer Occupation Blue Shield of California Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1040.00	

B.	Full Name (Last, First, Middle Initial) Lisa Ghotbi	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 108225 50 Beale Street	Transaction ID: SA11AI.8976
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$100.00
	Name of Employer Occupation Blue Shield of California Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

C.	Full Name (Last, First, Middle Initial) Ketan Gima	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 112246 50 Beale Street	Transaction ID: SA11AI.8977
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$50.00
	Name of Employer Occupation Blue Shield of California Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional)	380.00
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 21 / 55
(check only one)

<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Deborah Gordon		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 115621 50 Beale Street		Transaction ID: SA11AI.8978
City State Zip Code San Francisco CA 94105	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 45.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$22.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

B.

Full Name (Last, First, Middle Initial) Christopher Gorecki		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 115257 50 Beale Street		Transaction ID: SA11AI.8979
City State Zip Code San Francisco CA 94105	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.

Full Name (Last, First, Middle Initial) Douglas Grant		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address emp 27417 50 Beale Street		Transaction ID: SA11AI.8980
City State Zip Code San Francisco CA 94105	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00
Name of Employer Blue Shield of California	Occupation Director	Payroll contribution per cycle \$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	85.00
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 22 / 55
(check only one)

<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Christy Gregg		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 022233 50 Beale Street		Transaction ID: SA11AI.8981
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$22.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

B.

Full Name (Last, First, Middle Initial) Melissa Hall		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 115540 50 Beale Street		Transaction ID: SA11AI.8983
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$22.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

C.

Full Name (Last, First, Middle Initial) Robert Harjo		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address emp 16340 50 Beale Street		Transaction ID: SA11AI.8986
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Blue Shield of California	Occupation Employee	Payroll contribution per cycle \$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	110.00
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 23 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Jeffrey Hermosillo	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 114845 50 Beale Street	Transaction ID: SA11AI.8990
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Blue Shield of California Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 585.00	

B.	Full Name (Last, First, Middle Initial) Brent Hitchings	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 115569 50 Beale Street	Transaction ID: SA11AI.8993
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Blue Shield of California Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 585.00	

C.	Full Name (Last, First, Middle Initial) Helena Hoffman	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 95671 50 Beale Street	Transaction ID: SA11AI.8995
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 22.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$11.00
	Name of Employer Blue Shield of California Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 286.00	

SUBTOTAL of Receipts This Page (optional)	112.00
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 24 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Stanford Hornbacher		Date of Receipt
	Mailing Address 016615 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8997
Name of Employer Blue Shield of California		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 585.00	45.00
		Payroll contribution per cycle \$22.50	

B.	Full Name (Last, First, Middle Initial) Diana Huang		Date of Receipt
	Mailing Address emp 114587, 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8998
Name of Employer Blue Shield		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	20.00
		Payroll contribution per cycle \$10.00	

C.	Full Name (Last, First, Middle Initial) Tony R. Ibarra		Date of Receipt
	Mailing Address emp 112981 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9000
Name of Employer Blue Shield of California		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00	30.00
		Payroll contribution per cycle \$15.00	

SUBTOTAL of Receipts This Page (optional)	95.00
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 25 / 55
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Marianne Jackson

Mailing Address emp 112372
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Senior Vice President, Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1851.97

Date of Receipt MM / DD / YYYY
12 / 31 / 2008

Transaction ID: SA11AI.9002

Amount of Each Receipt this Period 160.00

Payroll contribution per cycle \$80.00

B. Full Name (Last, First, Middle Initial)
Seth Jacobs

Mailing Address emp 16574
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2008

Transaction ID: SA11AI.9003

Amount of Each Receipt this Period 45.00

Payroll contribution per cycle \$22.50

C. Full Name (Last, First, Middle Initial)
Kathryn Jefcoat

Mailing Address emp 95114
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2008

Transaction ID: SA11AI.9005

Amount of Each Receipt this Period 20.00

Payroll contribution per cycle \$10.00

SUBTOTAL of Receipts This Page (optional) ▶ **225.00**

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 26 / 55
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Michael Johnson

Mailing Address emp 111769
 50 Beale Street

City State Zip Code
 San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Blue Shield of California Employee

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 493.21

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9006

Amount of Each Receipt this Period
 39.40

Payroll contribution per cycle \$19.70

B. Full Name (Last, First, Middle Initial)
 David Joyner

Mailing Address emp 19639
 50 Beale Street

City State Zip Code
 San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Blue Shield of California Vice President

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1040.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9008

Amount of Each Receipt this Period
 80.00

Payroll contribution per cycle \$40.00

C. Full Name (Last, First, Middle Initial)
 Allison Kawamoto

Mailing Address 094997
 50 Beale Street

City State Zip Code
 San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Blue Shield of California employee

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 323.57

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9011

Amount of Each Receipt this Period
 26.42

Payroll contribution per cycle \$13.21

SUBTOTAL of Receipts This Page (optional) ► **145.82**

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 27 / 55

(check only one)

<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Amna Khan-Mirza

Mailing Address 113797

50 Beale Street

City

San Francisco

State

CA

Zip Code

94105

FEC ID number of contributing federal political committee.

C

Name of Employer
Blue Shield

Occupation
Employee

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9012

Amount of Each Receipt this Period

30.00

Payroll contribution per cycle \$15.00

B.

Full Name (Last, First, Middle Initial)

Tina Kibler

Mailing Address 115267

50 Beale Street

City

San Francisco

State

CA

Zip Code

94105

FEC ID number of contributing federal political committee.

C

Name of Employer
Blue Shield of California

Occupation
employee

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9013

Amount of Each Receipt this Period

45.00

Payroll contribution per cycle \$22.50

C.

Full Name (Last, First, Middle Initial)

Yun Kim

Mailing Address emp 109394

50 Beale Street

City

San Francisco

State

CA

Zip Code

94105

FEC ID number of contributing federal political committee.

C

Name of Employer
Blue Shield of California

Occupation
Employee

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9014

Amount of Each Receipt this Period

20.00

Payroll contribution per cycle \$10.00

SUBTOTAL of Receipts This Page (optional)

95.00

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 28 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Heidi Kunz	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 112238 50 Beale Street	Transaction ID: SA11AI.9015
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 235.50
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$117.75
	Name of Employer Occupation Blue Shield of California Chief Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3039.60	

B.	Full Name (Last, First, Middle Initial) Nora Lam	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 015642 50 Beale Street	Transaction ID: SA11AI.9016
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$15.00
	Name of Employer Occupation Blue Shield of California employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

C.	Full Name (Last, First, Middle Initial) Lisa Lambert	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 062157, 50 Beale Street	Transaction ID: SA11AI.9017
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Occupation Blue Shield employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	▶	285.50
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 29 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Janice A Lea		Date of Receipt
	Mailing Address 112048 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9021
Name of Employer Blue Shield		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00	50.00
			Payroll contribution per cycle \$25.00

B.	Full Name (Last, First, Middle Initial) Janice Levinsky		Date of Receipt
	Mailing Address 111653 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9024
Name of Employer Blue Shield of California		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00	30.00
			Payroll contribution per cycle \$15.00

C.	Full Name (Last, First, Middle Initial) Laura Lewis		Date of Receipt
	Mailing Address 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9027
Name of Employer Blue Shield of California		Occupation employee # 022384	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 585.00	45.00
			Payroll contribution per cycle \$22.50

SUBTOTAL of Receipts This Page (optional)	125.00
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 30 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Anthony Lipp		Date of Receipt
	Mailing Address 50 Beale Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9028
Name of Employer Blue Shield of California		Occupation employee # 004138	Amount of Each Receipt this Period 45.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 585.00	Payroll contribution per cycle \$22.50

B.	Full Name (Last, First, Middle Initial) Louis Lombardo		Date of Receipt
	Mailing Address emp 15859 50 Beale Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9029
Name of Employer Blue Shield of California		Occupation Employee	Amount of Each Receipt this Period 45.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 585.00	Payroll contribution per cycle \$22.50

C.	Full Name (Last, First, Middle Initial) Christopher Long		Date of Receipt
	Mailing Address emp 109838 50 Beale Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9030
Name of Employer Blue Shield of California		Occupation Employee	Amount of Each Receipt this Period 36.40
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 466.50	Payroll contribution per cycle \$18.20

SUBTOTAL of Receipts This Page (optional)	126.40
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 31 / 55
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Melissa Loura

Mailing Address 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee # 026790

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2008

Transaction ID: SA11AI.9031

Amount of Each Receipt this Period 20.00

Payroll contribution per cycle \$10.00

B. Full Name (Last, First, Middle Initial)
Kathleen M. Lucke

Mailing Address emp 111911
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 724.97

Date of Receipt 12 / 31 / 2008

Transaction ID: SA11AI.9032

Amount of Each Receipt this Period 58.32

Payroll contribution per cycle \$29.16

C. Full Name (Last, First, Middle Initial)
Michael Lujan

Mailing Address emp 112179
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2008

Transaction ID: SA11AI.9034

Amount of Each Receipt this Period 50.00

Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional) ► 128.32

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 32 / 55

(check only one)

<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Kathleen Lynaugh

Mailing Address emp 109411
50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Shield of California Employee

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
780.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9036

Amount of Each Receipt this Period

60.00

Payroll contribution per cycle \$30.00

B.

Full Name (Last, First, Middle Initial)
Elinor Mackinnon

Mailing Address emp 113314, 50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Shield employee

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9037

Amount of Each Receipt this Period

100.00

Payroll contribution per cycle \$50.00

C.

Full Name (Last, First, Middle Initial)
Fred J. Mann

Mailing Address emp 61151
50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Shield of California Employee

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9038

Amount of Each Receipt this Period

20.00

Payroll contribution per cycle \$10.00

SUBTOTAL of Receipts This Page (optional)

180.00

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 33 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Paul Markovich	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 16510 50 Beale Street	Transaction ID: SA11AI.9039
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 154.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$77.00
	Name of Employer Occupation Blue Shield of California Employee	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2002.00

B.	Full Name (Last, First, Middle Initial) Thomas McCaffery	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 115792 50 Beale Street	Transaction ID: SA11AI.9041
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$30.00
	Name of Employer Occupation Blue Shield of California employee	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 570.00

C.	Full Name (Last, First, Middle Initial) Shelley McFarland	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 061236, 50 Beale Street	Transaction ID: SA11AI.9043
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 17.06
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$8.53
	Name of Employer Occupation Blue Shield employee	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 219.63

SUBTOTAL of Receipts This Page (optional)	231.06
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 34 / 55
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Lorie Merrill

Mailing Address 50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee # 095447

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 585.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	8

Transaction ID: SA11AI.9044

Amount of Each Receipt this Period
45.00

Payroll contribution per cycle \$22.50

B. Full Name (Last, First, Middle Initial)
David Morris

Mailing Address 50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee # 114117

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	8

Transaction ID: SA11AI.9046

Amount of Each Receipt this Period
20.00

Payroll contribution per cycle \$10.00

C. Full Name (Last, First, Middle Initial)
Cathleen Murphy

Mailing Address emp 113067, 50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield Occupation employee

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	8

Transaction ID: SA11AI.9047

Amount of Each Receipt this Period
50.00

Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional) ► **115.00**

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 35 / 55
(check only one)

<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Jon Murphy		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address emp 112151 50 Beale Street		Transaction ID: SA11AI.9048
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.96
Name of Employer Blue Shield of California	Occupation Employee	Payroll contribution per cycle \$13.48
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 361.00	

B.

Full Name (Last, First, Middle Initial) Debbie Naegle		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address emp 16484 50 Beale Street		Transaction ID: SA11AI.9049
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 67.39
Name of Employer Blue Shield of California	Occupation Employee	Payroll contribution per cycle \$33.70
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 871.56	

C.

Full Name (Last, First, Middle Initial) Paul Nicknig		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 50 Beale Street		Transaction ID: SA11AI.9050
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer Blue Shield of California	Occupation employee # 112383	Payroll contribution per cycle \$22.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

SUBTOTAL of Receipts This Page (optional)	139.35
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 36 / 55
(check only one)

<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Robert Novelli		Date of Receipt	
	Mailing Address emp 111112 50 Beale Street		M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.9051
	San Francisco	CA	94105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		145.14	
Name of Employer Blue Shield of California		Occupation Senior Vice President		Payroll contribution per cycle \$72.57
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1873.42		

B.	Full Name (Last, First, Middle Initial) Christine Orr		Date of Receipt	
	Mailing Address Employee # 040096 50 Beale Street		M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.9054
	San Francisco	CA	94105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer Blue Shield of California		Occupation		Payroll contribution per cycle \$25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		325.00		

C.	Full Name (Last, First, Middle Initial) Jenni Owens		Date of Receipt	
	Mailing Address emp 032219 50 Beale Street		M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.9055
	San Francisco	CA	94105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer Blue Shield of California		Occupation employee		Payroll contribution per cycle \$25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		375.00		

SUBTOTAL of Receipts This Page (optional)	245.14
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 37 / 55

(check only one)

<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
William Panek

Mailing Address emp 18535
50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Shield of California Medical Director

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9058

Amount of Each Receipt this Period

20.00

Payroll contribution per cycle \$10.00

B.

Full Name (Last, First, Middle Initial)
Jeffrey Passaro

Mailing Address emp 018615
50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Shield of California employee

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9086

Amount of Each Receipt this Period

30.00

Payroll contribution per cycle \$15.00

C.

Full Name (Last, First, Middle Initial)
Kimberley Reed

Mailing Address emp 109736
50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Shield of California employee

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9095

Amount of Each Receipt this Period

50.00

Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional)

100.00

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 38 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Julie Reid		Date of Receipt
	Mailing Address emp 032370 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9096
Name of Employer Blue Shield of California		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="375.00"/>	<input type="text" value="50.00"/>
			Payroll contribution per cycle \$25.00

B.	Full Name (Last, First, Middle Initial) Diana Reynolds		Date of Receipt
	Mailing Address 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9098
Name of Employer Blue Shield of California		Occupation employee # 115295	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="292.50"/>	<input type="text" value="22.50"/>
			Payroll contribution per cycle \$11.25

C.	Full Name (Last, First, Middle Initial) Kathy Richards		Date of Receipt
	Mailing Address emp 109053 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9099
Name of Employer Blue Shield of California		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1300.00"/>	<input type="text" value="100.00"/>
			Payroll contribution per cycle \$50.00

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="172.50"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 39 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mika D. Riedinger	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 27156 50 Beale Street	Transaction ID: SA11AI.9100
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 36.88
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$18.44
	Name of Employer Occupation Blue Shield of California Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 478.24	

B.	Full Name (Last, First, Middle Initial) Karen Rinaldi	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 111645 50 Beale Street	Transaction ID: SA11AI.9101
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 25.50
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$12.75
	Name of Employer Occupation Blue Shield of California Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.95	

C.	Full Name (Last, First, Middle Initial) Thad Roake	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 50 Beale Street	Transaction ID: SA11AI.9102
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 246.14
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$60.57
	Name of Employer Occupation Blue Shield of California employee # 115536	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3949.82	

SUBTOTAL of Receipts This Page (optional)	308.52
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: PAGE 40 / 55
(check only one)

<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Julie Roberts

Mailing Address 50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee # 113789

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9103

Amount of Each Receipt this Period 20.00

Payroll contribution per cycle \$10.00

B. Full Name (Last, First, Middle Initial)
Norvita Robinson

Mailing Address emp 111723, 50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9104

Amount of Each Receipt this Period 20.00

Payroll contribution per cycle \$10.00

C. Full Name (Last, First, Middle Initial)
Garry Ronco

Mailing Address 50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee # 115653

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9105

Amount of Each Receipt this Period 45.00

Payroll contribution per cycle \$22.50

SUBTOTAL of Receipts This Page (optional) ► 85.00

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 41 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Martha Saafir		Date of Receipt
	Mailing Address 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9106
Name of Employer Blue Shield of California		Occupation employee # 095645	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 260.00	<input type="text"/> 20.00
		Payroll contribution per cycle \$10.00	

B.	Full Name (Last, First, Middle Initial) Mark Sachs		Date of Receipt
	Mailing Address 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9107
Name of Employer Blue Shield of California		Occupation employee # 114287	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 390.00	<input type="text"/> 30.00
		Payroll contribution per cycle \$15.00	

C.	Full Name (Last, First, Middle Initial) Joseph Safran		Date of Receipt
	Mailing Address emp 109164, 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9108
Name of Employer Blue Shield		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 520.00	<input type="text"/> 40.00
		Payroll contribution per cycle \$20.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 90.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 55

(check only one)

<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Richard Salow

Mailing Address 50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Shield of California employee # 115516

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 485.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9109

Amount of Each Receipt this Period
50.00

Payroll contribution per cycle \$25.00

B.

Full Name (Last, First, Middle Initial)

Lauri Satterwhaite

Mailing Address emp 29223
50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Shield of California Employee

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9111

Amount of Each Receipt this Period
20.00

Payroll contribution per cycle \$10.00

C.

Full Name (Last, First, Middle Initial)

Derek Schneider

Mailing Address emp 116208
50 Beale Street

City State Zip Code
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Shield of California employee

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.9113

Amount of Each Receipt this Period
50.00

Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional) ▶

120.00

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 43 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Christopher K. Seides	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	Mailing Address emp 95748 50 Beale Street	Transaction ID: SA11AI.9114
	City San Francisco State CA Zip Code 94105	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$20.00
	Name of Employer Blue Shield of California Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 410.00	

B.	Full Name (Last, First, Middle Initial) Jason Sims	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	Mailing Address 50 Beale Street	Transaction ID: SA11AI.9116
	City San Francisco State CA Zip Code 94105	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$15.00
	Name of Employer Blue Shield of California Occupation employee # 112432 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00	

C.	Full Name (Last, First, Middle Initial) Deborah Smith	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	Mailing Address 50 Beale Street	Transaction ID: SA11AI.9117
	City San Francisco State CA Zip Code 94105	Amount of Each Receipt this Period 33.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$16.50
	Name of Employer Blue Shield of California Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 429.00	

SUBTOTAL of Receipts This Page (optional)	103.00
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 44 / 55
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Alan Sokolow
 Mailing Address 50 Beale Street
 City State Zip Code
 San Francisco CA 94105
 Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 3 1 / 2 0 0 8
Transaction ID: SA11AI.9118
 Amount of Each Receipt this Period
 100.00
 Payroll contribution per cycle \$50.00
 Name of Employer Occupation
 Blue Shield of California employee # 115614
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1300.00
 FEC ID number of contributing federal political committee. **C**

B. Full Name (Last, First, Middle Initial)
 Robert Spector
 Mailing Address emp 114420, 50 Beale Street
 City State Zip Code
 San Francisco CA 94105
 Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 3 1 / 2 0 0 8
Transaction ID: SA11AI.9121
 Amount of Each Receipt this Period
 43.06
 Payroll contribution per cycle \$20.78
 Name of Employer Occupation
 Blue Shield employee
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 532.38
 FEC ID number of contributing federal political committee. **C**

C. Full Name (Last, First, Middle Initial)
 Nancy Stalker
 Mailing Address emp 16479
 50 Beale Street
 City State Zip Code
 San Francisco CA 94105
 Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 3 1 / 2 0 0 8
Transaction ID: SA11AI.9123
 Amount of Each Receipt this Period
 60.00
 Payroll contribution per cycle \$30.00
 Name of Employer Occupation
 Blue Shield of California Vice President, Pharmacy Services
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 780.00
 FEC ID number of contributing federal political committee. **C**

SUBTOTAL of Receipts This Page (optional) ► 203.06
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 45 / 55
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Robert F. Stephenson

Mailing Address emp 32257
50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.9124
Amount of Each Receipt this Period 20.00
Payroll contribution per cycle \$10.00

B. Full Name (Last, First, Middle Initial)
Susan Stephenson

Mailing Address emp 109942, 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.9125
Amount of Each Receipt this Period 20.00
Payroll contribution per cycle \$10.00

C. Full Name (Last, First, Middle Initial)
Terrance Stover

Mailing Address 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee # 115522

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt 12 / 31 / 2008
Transaction ID: SA11AI.9127
Amount of Each Receipt this Period 45.00
Payroll contribution per cycle \$22.50

SUBTOTAL of Receipts This Page (optional) ▶ 85.00

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 46 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Kimberly Streit	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 095254 50 Beale Street	Transaction ID: SA11AI.9128
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Blue Shield of California Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00	

B.	Full Name (Last, First, Middle Initial) Malcolm Strohson Jr.	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 50 Beale Street	Transaction ID: SA11AI.9129
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Blue Shield of California Occupation employee # 115599 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 585.00	

C.	Full Name (Last, First, Middle Initial) Preddis Sullivan	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 115476 50 Beale Street	Transaction ID: SA11AI.9130
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Blue Shield of California Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional)	145.00
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 47 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Lyle Swallow	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 18612 50 Beale Street	Transaction ID: SA11AI.9131
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$75.00
	Name of Employer Occupation Blue Shield of California Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1565.00	

B.	Full Name (Last, First, Middle Initial) James Taylor	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 112237, 50 Beale Street	Transaction ID: SA11AI.9132
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Occupation Blue Shield employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) Eric Terndrup	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 114199 50 Beale St.	Transaction ID: SA11AI.9133
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 56.78
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$28.39
	Name of Employer Occupation Blue Shield of California Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 711.99	

SUBTOTAL of Receipts This Page (optional)	226.78
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 48 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ryan Thompson	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 114592, 50 Beale Street	Transaction ID: SA11AI.9136
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$15.00
	Name of Employer Blue Shield Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00	

B.	Full Name (Last, First, Middle Initial) Joanne Trenam	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 020511, 50 Beale Street	Transaction ID: SA11AI.9141
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Blue Shield Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) Margaret Trevor	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 115606 50 Beale Street	Transaction ID: SA11AI.9142
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Blue Shield of California Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional)	100.00
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 49 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Robert Veeneman		Date of Receipt
	Mailing Address 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9144
Name of Employer Blue Shield of California		Occupation employee # 095413	Amount of Each Receipt this Period <input type="text" value="200.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="2416.63"/>	Payroll contribution per cycle \$100.00

B.	Full Name (Last, First, Middle Initial) Karen Vigil		Date of Receipt
	Mailing Address 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9146
Name of Employer Blue Shield of California		Occupation employee	Amount of Each Receipt this Period <input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="750.00"/>	Payroll contribution per cycle \$50.00

C.	Full Name (Last, First, Middle Initial) Robert Wadsworth		Date of Receipt
	Mailing Address emp 18560 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9149
Name of Employer Blue Shield of California		Occupation Employee	Amount of Each Receipt this Period <input type="text" value="60.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="780.00"/>	Payroll contribution per cycle \$30.00

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="360.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 50 / 55
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Troy Ward

Mailing Address 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California Occupation employee # 114007

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt 12 / 31 / 2008

Transaction ID: SA11AI.9150

Amount of Each Receipt this Period 45.00

Payroll contribution per cycle \$22.50

B. Full Name (Last, First, Middle Initial)
Diane Watts

Mailing Address emp 113379, 50 Beale Street

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 31 / 2008

Transaction ID: SA11AI.9151

Amount of Each Receipt this Period 40.00

Payroll contribution per cycle \$20.00

C. Full Name (Last, First, Middle Initial)
Mark Weideman

Mailing Address 114691 50 Beale St

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 12 / 31 / 2008

Transaction ID: SA11AI.9152

Amount of Each Receipt this Period 80.00

Payroll contribution per cycle \$40.00

SUBTOTAL of Receipts This Page (optional) ► 165.00

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 51 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Bonnie Wells	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 113298 50 Beale Street	Transaction ID: SA11AI.9153
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Occupation Blue Shield of California Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) Noel Whitman	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 50 Beale Street	Transaction ID: SA11AI.9156
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Occupation Blue Shield fo California employee # 114963	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

C.	Full Name (Last, First, Middle Initial) Ms Janet D. Widmann	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 111756 50 Beale Street	Transaction ID: SA11AI.9157
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$30.00
	Name of Employer Occupation Blue Shield of California Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

SUBTOTAL of Receipts This Page (optional)	125.00
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 52 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms Fiona M. Wilmot	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	Mailing Address emp 111587 50 Beale Street	Transaction ID: SA11AI.9159
	City San Francisco State CA Zip Code 94105	Amount of Each Receipt this Period 39.38
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$19.69
	Name of Employer Blue Shield of California Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 508.94	

B.	Full Name (Last, First, Middle Initial) Jered Wilson	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	Mailing Address 50 Beale Street	Transaction ID: SA11AI.9160
	City San Francisco State CA Zip Code 94105	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Blue Shield of California Occupation employee # 115412 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 585.00	

C.	Full Name (Last, First, Middle Initial) Carol Wise	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	Mailing Address emp 109914 50 Beale Street	Transaction ID: SA11AI.9162
	City San Francisco State CA Zip Code 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Blue Shield of California Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	104.38
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 53 / 55
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Jason Wong	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address emp 112700, 50 Beale Street	Transaction ID: SA11AI.9165
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Blue Shield Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) Amy Yao	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 50 Beale Street	Transaction ID: SA11AI.9167
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$30.00
	Name of Employer Blue Shield of California Occupation employee #115363 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 757.50	

C.	Full Name (Last, First, Middle Initial) John S. Yao	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 50 Beale Street	Transaction ID: SA11AI.9168
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Blue Shield of California Occupation employee # 111926 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 292.50	

SUBTOTAL of Receipts This Page (optional)	125.00
TOTAL This Period (last page this line number only)	7549.75

**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 54 / 55

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
FRIENDS OF BARBARA BOXER

Transaction ID: SB23.9197

Date of Disbursement

Mailing Address 2801 Turk Blvd.,
Suite 306

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

City State Zip Code
San Francisco CA 94118

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
2010 Primary Election

--

Category/
Type

Candidate Name
FRIENDS OF BARBARA BOXER

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District: 00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

1000.00

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 55 / 55

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Bank, Fees	Transaction ID: SB29.9198 Date of Disbursement
	Mailing Address 345 Montgomery Street	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/>
	City San Francisco State CA Zip Code 94101	Amount of Each Disbursement this Period
	Purpose of Disbursement Account Analysis Fee	<input type="text" value="33.28"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type
	State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="33.28"/>
TOTAL This Period (last page this line number only)	<input type="text" value="33.28"/>