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Federal Election Committee  
999 E. Street, NW  
Washington, DC 20463

To Whom It May Concern:

Enclosed please find the July Quarterly Report for Massachusetts Blue PAC of Blue Cross Blue Shield of Massachusetts.

If you have any questions or concerns, please do not hesitate to contact me directly at 617-246-3359 or at [massachusettsbluepac@yahoo.com](mailto:massachusettsbluepac@yahoo.com)

Thank you.

Very truly yours,



Deirdre Savage  
Treasurer  
Massachusetts Blue PAC  
FEC ID# C00523217

NOTICE ON NOTICE ON GOVERNMENT

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**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

MASSACHUSETTS BLUE PAC OF BLUE CROSS BLUE SHIELD  
OF MASSACHUSETTS

ADDRESS (number and street)

101 HUNTINGTON AVE



Check if different than previously reported. (ACC)

SUITE 1300

BOSTON

MA

02199-7611

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00523217

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



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



Termination Report (TER)

(b) Monthly Report Due On:



Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)



Nov 20 (M11) (Non-Election Year Only)



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



Dec 20 (M12) (Non-Election Year Only)



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

State

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



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

State

5. Covering Period

04 / 01 / 2017

06 / 30 / 2017

through

04 / 01 / 2017

06 / 30 / 2017

04 / 01 / 2017

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

Deborah W. Sarge

Signature of Treasurer

Date

04 / 13 / 2017

04 / 13 / 2017

04 / 13 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only

**FEC FORM 3X**  
Rev. 05/2016

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Report Covering the Period: From:

**04** ' **01** ' **2017**

To:

**07** ' **30** ' **2017**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <b>2017</b>		<b>10,929.07</b>
(b) Cash on Hand at Beginning of Reporting Period.....	<b>10,929.07</b>	
(c) Total Receipts (from Line 19) .....	<b>0-</b>	<b>0-</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<b>10,929.07</b>	<b>10,929.07</b>
7. Total Disbursements (from Line 31) .....	<b>1,596-</b>	<b>1,692-</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<b>9,333.07</b>	<b>9,237.07</b>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....		

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

**For further information contact:**

Federal Election Commission  
1050 First Street, N.E.  
Washington, DC 20463

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

20170730 10:00 AM

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Report Covering the Period: From: 04 01 2017 To: 06 30 2017

**I. Receipts**

**COLUMN A**  
Total This Period

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

11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....		
(ii) Unitemized.....	0 -	0 -
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶		
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	0 -	0 -
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0 -	0 -

NON-FEDERAL TRANSFERS

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

**II. Disbursements**

**COLUMN A**  
Total This Period

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

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....	96-	192-
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	96-	192-
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	1500-	1500-
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F) .....		
26. Loan Repayments Made .....		
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		
29. Other Disbursements (Including Non-Federal Donations) .....		
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share .....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1596-	1692-
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	1596-	1692-

20160501 10:00:00 AM



**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	OF
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27		
	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b		

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 Pac of BCBSMA*

**A.**

Full Name (Last, First, Middle Initial)  
*Seth Moulton for Congress*

Mailing Address  
*P.O. box 2013*

City  
*Salem* State  
*ma* Zip Code  
*01970*

Purpose of Disbursement  
*Contrib*

Candidate Name  
*Seth Moulton*

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

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement  
*04 / 07 / 2017*

FEC Identification Number  
*C*

Amount of Each Disbursement this Period  
*500 -*

Memo Item

**B.**

Full Name (Last, First, Middle Initial)  
*Kaine for Virginia*

Mailing Address  
*1490 - 5A Quarterpath Rd*

City  
*Williamsburg* State  
*VA* Zip Code  
*23185*

Purpose of Disbursement  
*Contr.*

Candidate Name  
*Tim Kaine*

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

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement  
*04 / 25 / 2017*

FEC Identification Number  
*C*

Amount of Each Disbursement this Period  
*1,000 -*

Memo Item

**C.**

Full Name (Last, First, Middle Initial)  
*Bank of America*

Mailing Address  
*535 Washh St.*

City  
*Weymouth* State  
*MA* Zip Code  
*02188*

Purpose of Disbursement  
*Bank fees*

Candidate Name

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

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement  
*04 / 25 / 2017*

FEC Identification Number  
*C*

Amount of Each Disbursement this Period  
*96 -*

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... *1,596 -*

**TOTAL** This Period (last page this line number only)..... *1,596 -*

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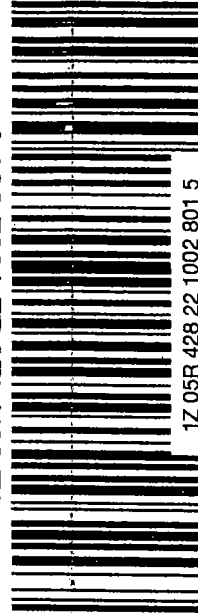
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PREPARER  
 (3/2015)

*MP*

3/26/2018  
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