

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

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 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) 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 (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 04 01 2008 through 06 30 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 09 03 2008

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

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

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

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

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; border-collapse: collapse;"><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	92819.29									
(c) Total Receipts (from Line 19)	23477.00	50595.07								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	116296.29	116302.77								
7. Total Disbursements (from Line 31)	54103.91	54110.39								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	62192.38	62192.38								
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
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

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	16124.60	28255.62
(i) Itemized (use Schedule A)	7352.40	22339.45
(ii) Unitemized	23477.00	50595.07
(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)	23477.00	50595.07
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))	23477.00	50595.07
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	23477.00	50595.07

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.....	54000.00	54000.00
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.....	103.91	110.39
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))..	54103.91	54110.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	54103.91	54110.39

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)	23477.00	50595.07
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23477.00	50595.07
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 41
	<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	

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) Kenneth Sean Allen	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address emp 109049 50 Beale Street	Transaction ID: SA11AI.8017
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$20
	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	

B.	Full Name (Last, First, Middle Initial) Dennis Alva	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address emp 109311 50 Beale Street	Transaction ID: SA11AI.8019
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 115.02
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$19.17
	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 ▼ 245.56	

C.	Full Name (Last, First, Middle Initial) Tanya Ballow	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 108347 50 Beale Street	Transaction ID: SA11AI.8026
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 135.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Blue Shield of California Occupation employee # 108347 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)	370.02
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 7 / 41
(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)
Douglas Biehn

Mailing Address emp 112903, 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 06 / 30 / 2008

Transaction ID: SA11AI.8033

Amount of Each Receipt this Period 120.00

Payroll contribution per cycle \$20

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

Mailing Address emp 16451 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 Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt 06 / 30 / 2008

Transaction ID: SA11AI.8034

Amount of Each Receipt this Period 360.00

Payroll contribution per cycle \$60

C. Full Name (Last, First, Middle Initial)
Thomas Borchelt

Mailing Address 115465 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 ▼ 292.50

Date of Receipt 06 / 30 / 2008

Transaction ID: SA11AI.8036

Amount of Each Receipt this Period 135.00

Payroll contribution per cycle \$22.50

SUBTOTAL of Receipts This Page (optional) ► 615.00

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 8 / 41
(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)
Thomas Brophy

Mailing Address emp 114076, 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 Cross employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.8045

Amount of Each Receipt this Period
120.00

Payroll contribution per cycle \$20

B. Full Name (Last, First, Middle Initial)
William Brown

Mailing Address emp 059004, 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 ▼ 298.12

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.8046

Amount of Each Receipt this Period
140.64

Payroll contribution per cycle \$23.44

C. Full Name (Last, First, Middle Initial)
Michael-Anne Browne

Mailing Address emp 111514
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 ▼ 325.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.8047

Amount of Each Receipt this Period
150.00

Payroll contribution per cycle \$25

SUBTOTAL of Receipts This Page (optional) ► **410.64**

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 / 41

(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

Mailing Address emp 112821, 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 ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.8052

Amount of Each Receipt this Period

300.00

Payroll contribution per cycle \$30

B.

Full Name (Last, First, Middle Initial)
Deborah Chase

Mailing Address emp 114029, 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 ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.8054

Amount of Each Receipt this Period

120.00

Payroll contribution per cycle \$20

C.

Full Name (Last, First, Middle Initial)
Brian Clinch

Mailing Address emp 45006
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, Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 567.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.8056

Amount of Each Receipt this Period

208.24

Payroll contribution per cycle \$39.79

SUBTOTAL of Receipts This Page (optional) ▶

628.24

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 / 41
(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)
Bruce Cohen

Mailing Address emp 095327, 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 06 / 30 / 2008
Transaction ID: SA11AI.8058
Amount of Each Receipt this Period 120.00
Payroll contribution per cycle \$20

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

Mailing Address 115946
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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.8062
Amount of Each Receipt this Period 180.00
Payroll contribution per cycle \$30

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

Mailing Address emp 114609, 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 ▼ 1300.00

Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.8067
Amount of Each Receipt this Period 600.00
Payroll contribution per cycle \$100

SUBTOTAL of Receipts This Page (optional) ► 900.00

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 11 / 41
	<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) Susan Deleeuw		Date of Receipt
	Mailing Address 114798 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 06 / 30 / 2008
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8071
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 ▼ 292.50	<input type="text"/> 135.00
			Payroll contribution per cycle \$22.50

B.	Full Name (Last, First, Middle Initial) Ann DeRose		Date of Receipt
	Mailing Address 113203 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 06 / 30 / 2008
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8073
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 ▼ 292.50	<input type="text"/> 135.00
			Payroll contribution per cycle \$22.50

C.	Full Name (Last, First, Middle Initial) Tushar Desai		Date of Receipt
	Mailing Address 115087 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 06 / 30 / 2008
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8075
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 ▼ 292.50	<input type="text"/> 135.00
			Payroll contribution per cycle \$22.50

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 405.00
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 12 / 41
	<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) Patricia R. Domenickine	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address emp 111504 50 Beale Street	Transaction ID: SA11AI.8078
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 158.16
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$26.36
	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 ▼ 336.43	

B.	Full Name (Last, First, Middle Initial) James Elliott	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 115549 50 Beale Street	Transaction ID: SA11AI.8084
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$100
	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 ▼ 1300.00	

C.	Full Name (Last, First, Middle Initial) Thomas Epstein	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address emp 110249 50 Beale Street	Transaction ID: SA11AI.8086
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 360.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$60
	Name of Employer Occupation Blue Shield of California Vice President, Public Affairs	
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)	1118.16
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 13 / 41
(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)
Jacqueline Espinoza

Mailing Address 115623
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 ▼ 292.50

Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.8088
Amount of Each Receipt this Period 135.00
Payroll contribution per cycle \$22.50

B. Full Name (Last, First, Middle Initial)
Mark Gastineau

Mailing Address 115296
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 06 / 30 / 2008
Transaction ID: SA11AI.8096
Amount of Each Receipt this Period 240.00
Payroll contribution per cycle \$40

C. Full Name (Last, First, Middle Initial)
Robert Geyer

Mailing Address emp 42026
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 Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.8101
Amount of Each Receipt this Period 240.00
Payroll contribution per cycle \$40

SUBTOTAL of Receipts This Page (optional) ▶ **615.00**

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 14 / 41
	<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) Ketan Gima		Date of Receipt
	Mailing Address emp 112246 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 06 / 30 / 2008
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8103
Name of Employer Blue Shield of California		Occupation Manager	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	300.00
		Payroll contribution per cycle \$50	

B.	Full Name (Last, First, Middle Initial) Deborah Gordon		Date of Receipt
	Mailing Address 115621 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 06 / 30 / 2008
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8105
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 ▼ 292.50	135.00
		Payroll contribution per cycle \$22.50	

C.	Full Name (Last, First, Middle Initial) Christy Gregg		Date of Receipt
	Mailing Address 022233 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 06 / 30 / 2008
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8110
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 ▼ 292.50	135.00
		Payroll contribution per cycle \$22.50	

SUBTOTAL of Receipts This Page (optional)	570.00
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 / 41
(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) Melissa Hall		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
Mailing Address 115540 50 Beale Street		Transaction ID: SA11AI.8115
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 135.00
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 ▼ 292.50	

B.

Full Name (Last, First, Middle Initial) Jeffrey Hermosillo		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
Mailing Address 114845 50 Beale Street		Transaction ID: SA11AI.8126
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 135.00
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 ▼ 292.50	

C.

Full Name (Last, First, Middle Initial) Brent Hitchings		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
Mailing Address 115569 50 Beale Street		Transaction ID: SA11AI.8130
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 135.00
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 ▼ 292.50	

SUBTOTAL of Receipts This Page (optional)	405.00
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 16 / 41
	<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) 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 06 / 30 / 2008
	City State Zip Code San Francisco CA 94105	Transaction ID: SA11AI.8137
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 135.00
	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 ▼ <input type="text"/> 292.50	Payroll contribution per cycle \$22.50

B.	Full Name (Last, First, Middle Initial) Marianne Jackson	Date of Receipt
	Mailing Address emp 112372 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 06 / 30 / 2008
	City State Zip Code San Francisco CA 94105	Transaction ID: SA11AI.8143
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 402.08
	Name of Employer Blue Shield of California Occupation Senior Vice President, Human Resources Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 811.97	Payroll contribution per cycle \$60.52

C.	Full Name (Last, First, Middle Initial) Seth Jacobs	Date of Receipt
	Mailing Address emp 16574 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 06 / 30 / 2008
	City State Zip Code San Francisco CA 94105	Transaction ID: SA11AI.8144
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 135.00
	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 ▼ <input type="text"/> 292.50	Payroll contribution per cycle \$22.50

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 672.08
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 17 / 41
	<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) Michael Johnson	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address emp 111769 50 Beale Street	Transaction ID: SA11AI.8148
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 107.64
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$17.94
	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 ▼ 231.47	

B.	Full Name (Last, First, Middle Initial) David Joyner	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address emp 19639 50 Beale Street	Transaction ID: SA11AI.8150
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 240.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$40
	Name of Employer Blue Shield of California Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00	

C.	Full Name (Last, First, Middle Initial) Tina Kibler	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 115267 50 Beale Street	Transaction ID: SA11AI.8156
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 135.00
	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 ▼ 292.50	

SUBTOTAL of Receipts This Page (optional)	482.64
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 18 / 41
	<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 06 / 30 / 2008
	Mailing Address emp 112238 50 Beale Street	Transaction ID: SA11AI.8158
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 706.50
	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 ▼ 1508.85	

B.	Full Name (Last, First, Middle Initial) Colleen Lewis	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address emp 113832 50 Beale St.	Transaction ID: SA11AI.8175
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 129.07
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle - \$21.51
	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 ▼ 208.34	

C.	Full Name (Last, First, Middle Initial) Laura Lewis	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 50 Beale Street	Transaction ID: SA11AI.8179
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 135.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Occupation Blue Shield of California employee # 022384	
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)	970.57
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 19 / 41
(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)
Anthony Lipp

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 # 004138

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 292.50

Date of Receipt 06 / 30 / 2008

Transaction ID: SA11AI.8180

Amount of Each Receipt this Period 135.00

Payroll contribution per cycle \$22.50

B. Full Name (Last, First, Middle Initial)
Louis Lombardo

Mailing Address emp 15859 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 ▼ 292.50

Date of Receipt 06 / 30 / 2008

Transaction ID: SA11AI.8181

Amount of Each Receipt this Period 135.00

Payroll contribution per cycle \$22.50

C. Full Name (Last, First, Middle Initial)
Christopher Long

Mailing Address emp 109838 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 ▼ 229.90

Date of Receipt 06 / 30 / 2008

Transaction ID: SA11AI.8182

Amount of Each Receipt this Period 109.20

Payroll contribution per cycle \$18.20

SUBTOTAL of Receipts This Page (optional) ► **379.20**

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 20 / 41
(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)
 Kathleen M. Lucke
 Mailing Address emp 111911
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.8184
 Amount of Each Receipt this Period 161.34
 Payroll contribution per cycle \$26.89
 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 ▼ 343.62

B. Full Name (Last, First, Middle Initial)
 Michael Lujan
 Mailing Address emp 112179
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.8186
 Amount of Each Receipt this Period 150.00
 Payroll contribution per cycle \$25.00
 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 ▼ 325.00

C. Full Name (Last, First, Middle Initial)
 Kathleen Lynaugh
 Mailing Address emp 109411
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.8187
 Amount of Each Receipt this Period 180.00
 Payroll contribution per cycle \$30.00
 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

SUBTOTAL of Receipts This Page (optional) ► **491.34**
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: PAGE 21 / 41
(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)
 Elinor Mackinnon
 Mailing Address emp 113314, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.8188
 Amount of Each Receipt this Period 300.00
 Payroll contribution per cycle \$50.00
 Name of Employer Blue Shield Occupation employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 650.00
 FEC ID number of contributing federal political committee. **C**

B. Full Name (Last, First, Middle Initial)
 Paul Markovich
 Mailing Address emp 16510, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.8191
 Amount of Each Receipt this Period 462.00
 Payroll contribution per cycle \$77.00
 Name of Employer Blue Shield of California Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 1001.00
 FEC ID number of contributing federal political committee. **C**

C. Full Name (Last, First, Middle Initial)
 Lorie Merrill
 Mailing Address 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.8200
 Amount of Each Receipt this Period 135.00
 Payroll contribution per cycle \$22.50
 Name of Employer Blue Shield of California Occupation employee # 095447
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 292.50
 FEC ID number of contributing federal political committee. **C**

SUBTOTAL of Receipts This Page (optional) ► **897.00**
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 / 41
(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)
 Cathleen Murphy
 Mailing Address emp 113067, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.8204
 Amount of Each Receipt this Period 150.00
 Payroll contribution per cycle \$25.00
 Name of Employer Blue Shield Occupation employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 325.00
 FEC ID number of contributing federal political committee. **C**

B. Full Name (Last, First, Middle Initial)
 Debbie Naegle
 Mailing Address emp 16484 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.8206
 Amount of Each Receipt this Period 202.16
 Payroll contribution per cycle \$33.69
 Name of Employer Blue Shield of California Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 433.55
 FEC ID number of contributing federal political committee. **C**

C. Full Name (Last, First, Middle Initial)
 Paul Nicknig
 Mailing Address 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.8209
 Amount of Each Receipt this Period 135.00
 Payroll contribution per cycle \$22.50
 Name of Employer Blue Shield of California Occupation employee # 112383
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 292.50
 FEC ID number of contributing federal political committee. **C**

SUBTOTAL of Receipts This Page (optional) ► **487.16**
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 / 41
	<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 Novelli	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address emp 111112 50 Beale Street	Transaction ID: SA11AI.8210
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 435.42
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$72.57
	Name of Employer Occupation Blue Shield of California Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 930.01	

B.	Full Name (Last, First, Middle Initial) Kathy Richards	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address emp 109053 50 Beale Street	Transaction ID: SA11AI.8243
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$50.00
	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 ▼ 650.00	

C.	Full Name (Last, First, Middle Initial) Mika D. Riedinger	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address emp 27156 50 Beale Street	Transaction ID: SA11AI.8244
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 110.64
	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 ▼ 238.52	

SUBTOTAL of Receipts This Page (optional)	846.06
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 24 / 41
(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)
Thad Roake

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 # 115536

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2662.41

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.8246

Amount of Each Receipt this Period
613.42

Payroll contribution per cycle \$76.67

B.

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 ▼ 292.50

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.8249

Amount of Each Receipt this Period
135.00

Payroll contribution per cycle \$22.50

C.

Full Name (Last, First, Middle Initial)
Joseph Safran

Mailing Address emp 109164, 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
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.8252

Amount of Each Receipt this Period
120.00

Payroll contribution per cycle \$20.00

SUBTOTAL of Receipts This Page (optional) ► **868.42**

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 / 41
(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)
Deborah Smith

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 214.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.8264

Amount of Each Receipt this Period
99.00

Payroll contribution per cycle \$16.50

B. Full Name (Last, First, Middle Initial)
Alan Sokolow

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 # 115614

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.8265

Amount of Each Receipt this Period
300.00

Payroll contribution per cycle \$50.00

C. Full Name (Last, First, Middle Initial)
Robert Spector

Mailing Address emp 114420, 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) ▼ 260.74

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.8269

Amount of Each Receipt this Period
124.68

Payroll contribution per cycle \$20.78

SUBTOTAL of Receipts This Page (optional) ► **523.68**

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 / 41
(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)
 Nancy Stalker
 Mailing Address emp 16479
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.8271
 Amount of Each Receipt this Period 180.00
 Payroll contribution per cycle \$30.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield of California Occupation Vice President, Pharmacy Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 390.00

B. Full Name (Last, First, Middle Initial)
 Mary C StJohn
 Mailing Address 50 Beale St
 City San Francisco State CA Zip Code 94105
 Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.8275
 Amount of Each Receipt this Period 150.00
 Payroll contribution per cycle \$25.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 325.00

C. Full Name (Last, First, Middle Initial)
 Terrance Stover
 Mailing Address 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.8276
 Amount of Each Receipt this Period 135.00
 Payroll contribution per cycle \$22.50
 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 292.50

SUBTOTAL of Receipts This Page (optional) ► **465.00**
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 27 / 41
(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)
 Malcolm Strohson Jr.
 Mailing Address 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.8279
 Amount of Each Receipt this Period 135.00
 Payroll contribution per cycle \$22.50
 Name of Employer Blue Shield of California Occupation employee # 115599
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 292.50
 FEC ID number of contributing federal political committee. **C**

B. Full Name (Last, First, Middle Initial)
 Lyle Swallow
 Mailing Address emp 18612 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.8282
 Amount of Each Receipt this Period 310.00
 Payroll contribution per cycle \$51.66
 Name of Employer Blue Shield of California Occupation Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 590.00
 FEC ID number of contributing federal political committee. **C**

C. Full Name (Last, First, Middle Initial)
 Eric Terndrup
 Mailing Address emp 114199 50 Beale St.
 City San Francisco State CA Zip Code 94105
 Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.8284
 Amount of Each Receipt this Period 165.78
 Payroll contribution per cycle \$27.63
 Name of Employer Blue Shield of California Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 344.44
 FEC ID number of contributing federal political committee. **C**

SUBTOTAL of Receipts This Page (optional) ▶ **610.78**
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: PAGE 28 / 41
(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)
 Florence VanGeem
 Mailing Address emp 108247
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt MM / DD / YYYY
 06 / 30 / 2008
Transaction ID: SA11AI.8299
 Amount of Each Receipt this Period
 198.47
 Payroll contribution per cycle \$33.07
 Name of Employer Blue Shield of California Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 344.96
 FEC ID number of contributing federal political committee. **C**

B. Full Name (Last, First, Middle Initial)
 Robert Veeneman
 Mailing Address 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt MM / DD / YYYY
 06 / 30 / 2008
Transaction ID: SA11AI.8300
 Amount of Each Receipt this Period
 533.32
 Payroll contribution per cycle \$88.88
 Name of Employer Blue Shield of California Occupation employee # 095413
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1116.63
 FEC ID number of contributing federal political committee. **C**

C. Full Name (Last, First, Middle Initial)
 Robert Wadsworth
 Mailing Address emp 18560
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt MM / DD / YYYY
 06 / 30 / 2008
Transaction ID: SA11AI.8307
 Amount of Each Receipt this Period
 180.00
 Payroll contribution per cycle \$30.00
 Name of Employer Blue Shield of California Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00
 FEC ID number of contributing federal political committee. **C**

SUBTOTAL of Receipts This Page (optional) ► **911.79**
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 29 / 41
(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) Peter Walker		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
Mailing Address emp 109506 50 Beale Street		Transaction ID: SA11AI.8308
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 103.68
Name of Employer Blue Shield of California	Occupation Employee	Payroll contribution per cycle \$17.28
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.14	

B.

Full Name (Last, First, Middle Initial) Troy Ward		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
Mailing Address 50 Beale Street		Transaction ID: SA11AI.8309
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 135.00
Name of Employer Blue Shield of California	Occupation employee # 114007	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 ▼ 292.50	

C.

Full Name (Last, First, Middle Initial) Diane Watts		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
Mailing Address emp 113379, 50 Beale Street		Transaction ID: SA11AI.8310
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
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 ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	358.68
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 30 / 41
(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)
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 ▼
520.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.8311

Amount of Each Receipt this Period
240.00

Payroll contribution per cycle \$40.00

B.

Full Name (Last, First, Middle Initial)
Noel Whitman

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 fo California Occupation employee # 114963

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
292.50

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.8317

Amount of Each Receipt this Period
135.00

Payroll contribution per cycle \$22.50

C.

Full Name (Last, First, Middle Initial)
Ms Janet D. Widmann

Mailing Address emp 111756
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
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.8318

Amount of Each Receipt this Period
180.00

Payroll contribution per cycle \$30.00

SUBTOTAL of Receipts This Page (optional) ▶ **555.00**

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 31 / 41
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Ms Fiona M. Wilmot	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address emp 111587 50 Beale Street	Transaction ID: SA11AI.8320
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 118.14
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$19.69
	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 ▼ 252.97	

B.	Full Name (Last, First, Middle Initial) Jered Wilson	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 50 Beale Street	Transaction ID: SA11AI.8321
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 135.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Occupation Blue Shield of California employee # 115412	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 292.50	

C.	Full Name (Last, First, Middle Initial) Amy Yao	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 50 Beale Street	Transaction ID: SA11AI.8329
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 180.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$30.00
	Name of Employer Occupation Blue Shield of California employee #115363	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 367.50	

SUBTOTAL of Receipts This Page (optional)	433.14
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 32 / 41	
	(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"/> 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) John Yao		Date of Receipt																					
	Mailing Address emp 11926 50 Beale Street		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		3	0		2	0	0	8														
	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 Medical Director																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 292.50																						
		Transaction ID: SA11AI.8330		Amount of Each Receipt this Period																				
				135.00																				
				Payroll contribution per cycle \$22.50																				

SUBTOTAL of Receipts This Page (optional)	▶	135.00
TOTAL This Period (last page this line number only)	▶	16124.60

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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) AHIP PAC	Transaction ID: SB23.8349 Date of Disbursement 05 / 29 / 2008
	Mailing Address 601 Penn. Avenue NW #500 South Bldg.	Amount of Each Disbursement this Period 2500.00
	City WASHINGTON State DC Zip Code 20004	
	Purpose of Disbursement 2008 Contribution	
	Candidate Name AHIP PAC	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: CA District:	

B.	Full Name (Last, First, Middle Initial) BATTLE BORN POLITICAL ACTION COMMITTEE	Transaction ID: SB23.8370 Date of Disbursement 05 / 30 / 2008
	Mailing Address P.O. Box 370386 Suite 300	Amount of Each Disbursement this Period 1000.00
	City Las Vegas State NV Zip Code 89137	
	Purpose of Disbursement 2008 General Election	
	Candidate Name BATTLE BORN POLITICAL ACTION COMMITTEE	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) BECERRA FOR CONGRESS	Transaction ID: SB23.8382 Date of Disbursement 05 / 06 / 2008
	Mailing Address P.O. Box 261060	Amount of Each Disbursement this Period 1000.00
	City Los Angeles State CA Zip Code 90026	
	Purpose of Disbursement 2008 General (Reissue due to lost check)	
	Candidate Name BECERRA FOR CONGRESS	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: CA District: 31	

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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) BECERRA FOR CONGRESS <hr/> Mailing Address P.O. Box 261060 <hr/> City Los Angeles State CA Zip Code 90026 <hr/> Purpose of Disbursement 2008 General (lost chk #2005 -11/29/07) <hr/> Candidate Name BECERRA FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 31 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8383 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 0 8
	Amount of Each Disbursement this Period -1000.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) BECERRA FOR CONGRESS <hr/> Mailing Address P.O. Box 261060 <hr/> City Los Angeles State CA Zip Code 90026 <hr/> Purpose of Disbursement 2008 General Election <hr/> Candidate Name BECERRA FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 31 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8367 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) BLUEPAC - BCBSA PAC <hr/> Mailing Address 1310 G STREET NW <hr/> City WASHINGTON State DC Zip Code 20005 <hr/> Purpose of Disbursement BCBSA PAC Contribution - no code for PAC <hr/> Candidate Name BLUEPAC - BCBSA PAC <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8347 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 8
	Amount of Each Disbursement this Period 12500.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	12500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

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<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) DEMOCRATIC CONG. CAMPAIGN COMM.	Transaction ID: SB23.8360 Date of Disbursement 05 / 29 / 2008
	Mailing Address 430 South Capitol Street SE 2nd Floor	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement 2008 General Election	
	Candidate Name DEMOCRATIC CONG. CAMPAIGN COMM.	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DEMOCRATIC SEN. CAMPAIGN COMMITTEE	Transaction ID: SB23.8372 Date of Disbursement 05 / 30 / 2008
	Mailing Address 120 MARYLAND AVENUE NE	Amount of Each Disbursement this Period 5000.00
	City WASHINGTON State DC Zip Code 20002	
	Purpose of Disbursement 2008 Contribution	
	Candidate Name DEMOCRATIC SEN. CAMPAIGN COMMITTEE	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DC District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER	Transaction ID: SB23.8362 Date of Disbursement 05 / 29 / 2008
	Mailing Address 2801 Turk Blvd., Suite 306	Amount of Each Disbursement this Period 2000.00
	City San Francisco State CA Zip Code 94118	
	Purpose of Disbursement 2008 General Election	
	Candidate Name FRIENDS OF BARBARA BOXER	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	12000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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. FRIENDS OF DICK DURBIN COMMITTEE

Full Name (Last, First, Middle Initial)

FRIENDS OF DICK DURBIN COMMITTEE

Mailing Address 2443 Fillmore Street
333

City San Francisco State CA Zip Code 94115

Purpose of Disbursement
2008 General Election

Candidate Name
FRIENDS OF DICK DURBIN COMMITTEE

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: IL District: 00

Transaction ID: SB23.8345

Date of Disbursement

06 / 20 / 2008

Amount of Each Disbursement this Period

1000.00

B. FRIENDS OF LOIS CAPPS

Full Name (Last, First, Middle Initial)

FRIENDS OF LOIS CAPPS

Mailing Address PO Box 23940

City Santa Barbara State CA Zip Code 93121

Purpose of Disbursement
2008 General Election

Candidate Name
FRIENDS OF LOIS CAPPS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CA District: 23

Transaction ID: SB23.8343

Date of Disbursement

06 / 20 / 2008

Amount of Each Disbursement this Period

1000.00

C. FRIENDS OF MARK WARNER

Full Name (Last, First, Middle Initial)

FRIENDS OF MARK WARNER

Mailing Address 1029 NORTH ROYAL STREET 2ND FL

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
2008 Primary

Candidate Name
FRIENDS OF MARK WARNER

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: VA District: 00

Transaction ID: SB23.8365

Date of Disbursement

05 / 29 / 2008

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ►

4000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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 RAHM EMANUEL <hr/> Mailing Address P.O. Box 101124 <hr/> City Chicago State IL Zip Code 60610 <hr/> Purpose of Disbursement 2008 General Election Candidate Name FRIENDS OF RAHM EMANUEL <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 05 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8368 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) GRASSLEY COMMITTEE INC <hr/> Mailing Address PO BOX 1000 <hr/> City DES MOINES State IA Zip Code 50304 <hr/> Purpose of Disbursement 2010 General Election Candidate Name GRASSLEY COMMITTEE INC <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 00 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8375 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) JACKIE SPEIER FOR CONGRESS <hr/> Mailing Address PO BOX 112 <hr/> City BURLINGAME State CA Zip Code 94011 <hr/> Purpose of Disbursement 2008 Primary Candidate Name JACKIE SPEIER FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 12 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8363 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8
	Amount of Each Disbursement this Period 2000.00
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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

<p>A. Full Name (Last, First, Middle Initial) MATSUI FOR CONGRESS</p> <p>Mailing Address PO BOX 1738</p> <p>City SACRAMENTO State CA Zip Code 95812</p> <p>Purpose of Disbursement 2008 General Election</p> <p>Candidate Name MATSUI FOR CONGRESS</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.8374</p> <p>Date of Disbursement 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) MIKE THOMPSON FOR CONGRESS</p> <p>Mailing Address 5429 Madison Avenue</p> <p>City Sacramento State CA Zip Code 95841</p> <p>Purpose of Disbursement 2008 General Election</p> <p>Candidate Name MIKE THOMPSON FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.8373</p> <p>Date of Disbursement 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>C. Full Name (Last, First, Middle Initial) NANCY PELOSI FOR CONGRESS</p> <p>Mailing Address 235 Montgomery Street Suite 610</p> <p>City San Francisco State CA Zip Code 94104</p> <p>Purpose of Disbursement 2008 General</p> <p>Candidate Name NANCY PELOSI FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 08</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.8355</p> <p>Date of Disbursement 05 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>5000.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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) NANCY PELOSI FOR CONGRESS <hr/> Mailing Address 235 Montgomery Street Suite 610 <hr/> City San Francisco State CA Zip Code 94104 <hr/> Purpose of Disbursement 2008 General Election Candidate Name NANCY PELOSI FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 08 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <hr/>	Transaction ID: SB23.8369 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 5000.00 <hr/> Category/ Type
	B. Full Name (Last, First, Middle Initial) SENATE MAJORITY FUND <hr/> Mailing Address P.O. Box 32025 <hr/> City Phoenix State AZ Zip Code 85064 <hr/> Purpose of Disbursement 2008 General Election Candidate Name SENATE MAJORITY FUND <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <hr/>
C. Full Name (Last, First, Middle Initial) SOLIDARITY PAC <hr/> Mailing Address 607 14th Street N.W. Suite 800 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement 2008 Contribution Candidate Name SOLIDARITY PAC <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District: 00 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <hr/>	Transaction ID: SB23.8353 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 3000.00 <hr/> Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

9000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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<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) SOLIS FOR CONGRESS Mailing Address 6380 Wilshire Blvd. #1612 City Los Angeles State CA Zip Code 90048 Purpose of Disbursement 2008 General Candidate Name SOLIS FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 32 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8350 Date of Disbursement 05 / 29 / 2008
	Amount of Each Disbursement this Period 2000.00
B. Full Name (Last, First, Middle Initial) SOLIS FOR CONGRESS Mailing Address 6380 Wilshire Blvd. #1612 City Los Angeles State CA Zip Code 90048 Purpose of Disbursement 2008 General Election Candidate Name SOLIS FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 32 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8342 Date of Disbursement 06 / 20 / 2008
	Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	54000.00

**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)

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<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 Mailing Address 345 Montgomery Street City San Francisco State CA Zip Code 94101 Purpose of Disbursement Account Analysis Fee Candidate Name	Transaction ID: SB29.8380 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 15.87
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Bank, Fees Mailing Address 345 Montgomery Street City San Francisco State CA Zip Code 94101 Purpose of Disbursement Account Analysis Fee Candidate Name	Transaction ID: SB29.8379 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 24.32
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Bank, Fees Mailing Address 345 Montgomery Street City San Francisco State CA Zip Code 94101 Purpose of Disbursement Account Analysis Fee Candidate Name	Transaction ID: SB29.8378 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 8
	Amount of Each Disbursement this Period 63.72
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	103.91
TOTAL This Period (last page this line number only) ▶	103.91