

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 07 01 2007 through 12 31 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Karman Chan

Signature of Treasurer Electronically Filed by Karman Chan Date 01 31 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	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		54336.41
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	49363.67									
(c) Total Receipts (from Line 19)	52068.03	93095.29								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	101431.70	147431.70								
7. Total Disbursements (from Line 31)	35724.00	81724.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	65707.70	65707.70								
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	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	43933.32	68504.92
(i) Itemized (use Schedule A)		
(ii) Unitemized	6134.71	22590.37
(iii) TOTAL (add Lines 11(a)(i) and (ii)	50068.03	91095.29
(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)	50068.03	91095.29
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	2000.00	2000.00
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))	52068.03	93095.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	52068.03	93095.29

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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)	0.00	0.00
(i) Federal Share.....		
(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	12500.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	35724.00	69224.00
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.....	0.00	0.00
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))..	35724.00	81724.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35724.00	81724.00

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	50068.03	91095.29
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	50068.03	91095.29
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 / 57
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A.	Full Name (Last, First, Middle Initial) Kenneth Sean Allen		Date of Receipt
	Mailing Address emp 109049 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 7
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7333
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 ▼ 520.00	260.00

B.	Full Name (Last, First, Middle Initial) Dennis Alva		Date of Receipt
	Mailing Address emp 109311 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 7
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7336
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 ▼ 473.18	239.59

C.	Full Name (Last, First, Middle Initial) Tanya Ballow		Date of Receipt
	Mailing Address 108347		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 7
	City	State	Zip Code
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7345
	Name of Employer Blue Shield		Occupation employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 405.00	292.50

SUBTOTAL of Receipts This Page (optional)	792.09
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 7 / 57
(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)
Bret Balousek
Mailing Address 115527
City State Zip Code
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 ▼ 270.00
Date of Receipt: 12 / 31 / 2007
Transaction ID: SA11AI.7347
Amount of Each Receipt this Period: 195.00
Payroll contribution per cycle \$15.00

B. Full Name (Last, First, Middle Initial)
Tracy Barnes
Mailing Address emp 22076 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 ▼ 326.00
Date of Receipt: 12 / 31 / 2007
Transaction ID: SA11AI.7351
Amount of Each Receipt this Period: 195.00
Payroll contribution per cycle \$15.00

C. Full Name (Last, First, Middle Initial)
Benjamin Bell
Mailing Address emp 16357 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 ▼ 658.56
Date of Receipt: 12 / 31 / 2007
Transaction ID: SA11AI.7358
Amount of Each Receipt this Period: 332.28
Payroll contribution per cycle \$25.56

SUBTOTAL of Receipts This Page (optional) ▶ 722.28
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 57
	<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) Vivek Bhatia	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address emp 113173 50 Beale Street	Transaction ID: SA11AI.7359
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 130.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Occupation Blue Shield of California Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) Douglas Biehn	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address emp 112903, 50 Beale Street	Transaction ID: SA11AI.7360
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 260.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$20.00
	Name of Employer Occupation Blue Shield employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

C.	Full Name (Last, First, Middle Initial) Bruce Bodaken	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address emp 16451 50 Beale Street	Transaction ID: SA11AI.7361
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 780.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$60.00
	Name of Employer Occupation Blue Shield of California Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1560.00	

SUBTOTAL of Receipts This Page (optional)	1170.00
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 9 / 57
	<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) Shirley Bolden		Date of Receipt
	Mailing Address emp 016540, 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Shield		Occupation employee	Transaction ID: SA11AI.7362
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.12"/>	<input type="text" value="125.06"/>
			Payroll contribution per cycle \$9.62

B.	Full Name (Last, First, Middle Initial) Thomas Borchelt		Date of Receipt
	Mailing Address 115465		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Shield		Occupation employee	Transaction ID: SA11AI.7363
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="405.00"/>	<input type="text" value="292.50"/>
			Payroll contribution per cycle \$22.50

C.	Full Name (Last, First, Middle Initial) Gifford Boyce-Smith		Date of Receipt
	Mailing Address emp 19629 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Shield of California		Occupation Employee	Transaction ID: SA11AI.7368
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1100.00"/>	<input type="text" value="450.00"/>
			Payroll contribution per cycle \$50.00

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="867.56"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 10 / 57
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
 Linda Bronson
 Mailing Address emp 114382, 50 Beale Street
 City State Zip Code
 San Francisco CA 94105
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 7
Transaction ID: SA11AI.7370
 Amount of Each Receipt this Period
 195.00
 Payroll contribution per cycle \$15.00
 Name of Employer Occupation
 Blue Cross employee
 FEC ID number of contributing federal political committee. **C**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 390.00

B. Full Name (Last, First, Middle Initial)
 Thomas Brophy
 Mailing Address emp 114076, 50 Beale Street
 City State Zip Code
 San Francisco CA 94105
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 7
Transaction ID: SA11AI.7371
 Amount of Each Receipt this Period
 260.00
 Payroll contribution per cycle \$20.00
 Name of Employer Occupation
 Blue Cross employee
 FEC ID number of contributing federal political committee. **C**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 520.00

C. Full Name (Last, First, Middle Initial)
 William Brown
 Mailing Address emp 059004, 50 Beale Street
 City State Zip Code
 San Francisco CA 94105
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 7
Transaction ID: SA11AI.7372
 Amount of Each Receipt this Period
 287.43
 Payroll contribution per cycle \$22.11
 Name of Employer Occupation
 Blue Shield employee
 FEC ID number of contributing federal political committee. **C**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 568.66

SUBTOTAL of Receipts This Page (optional) ► **742.43**
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 / 57
	<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-Anne Browne	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address emp 111514 50 Beale Street	Transaction ID: SA11AI.7373
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 325.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00
	Name of Employer Occupation Blue Shield of California Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

B.	Full Name (Last, First, Middle Initial) Sue Burke	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address 054016	Transaction ID: SA11AI.7374
	City State Zip Code	Amount of Each Receipt this Period 130.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Occupation Blue Shield employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) Michele Carrillo	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address emp 112162, 50 Beale Street	Transaction ID: SA11AI.7376
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 130.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Occupation Blue Shield employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	585.00
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 12 / 57
(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)
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 Blue Shield Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2007

Transaction ID: SA11AI.7380

Amount of Each Receipt this Period 650.00

Payroll contribution per cycle \$50.00

B. Full Name (Last, First, Middle Initial)
George R. Chadwell

Mailing Address emp 110628
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 ▼ 337.70

Date of Receipt MM / DD / YYYY
12 / 31 / 2007

Transaction ID: SA11AI.7381

Amount of Each Receipt this Period 169.65

Payroll contribution per cycle \$13.05

C. 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 Blue Shield Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2007

Transaction ID: SA11AI.7382

Amount of Each Receipt this Period 260.00

Payroll contribution per cycle \$20.00

SUBTOTAL of Receipts This Page (optional) ► 1079.65

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 / 57
(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)
Denise Ciuffo

Mailing Address emp 054063, 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 MM / DD / YYYY
12 / 31 / 2007

Transaction ID: SA11AI.7383

Amount of Each Receipt this Period 130.00

Payroll contribution per cycle \$10.00

B. Full Name (Last, First, Middle Initial)
Theresa Clarke

Mailing Address emp 113787, 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 ▼ 650.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2007

Transaction ID: SA11AI.7384

Amount of Each Receipt this Period 325.00

Payroll contribution per cycle \$25.00

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 Blue Shield of California Occupation Vice President, Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1374.76

Date of Receipt MM / DD / YYYY
12 / 31 / 2007

Transaction ID: SA11AI.7385

Amount of Each Receipt this Period 631.11

Payroll contribution per cycle \$38.49

SUBTOTAL of Receipts This Page (optional) ► 1086.11

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

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

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

FOR LINE NUMBER: PAGE 14 / 57
(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)
Scott E. Coffin

Mailing Address emp 111731
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation Employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2007
Transaction ID: SA11AI.7386
Amount of Each Receipt this Period 130.00
Payroll contribution per cycle \$10.00

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

Mailing Address emp 095327, 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 31 / 2007
Transaction ID: SA11AI.7387
Amount of Each Receipt this Period 260.00
Payroll contribution per cycle \$20.00

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

Mailing Address emp 114609, 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield Occupation employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 12 / 31 / 2007
Transaction ID: SA11AI.7391
Amount of Each Receipt this Period 1300.00
Payroll contribution per cycle \$100.00

SUBTOTAL of Receipts This Page (optional) ► 1690.00

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 / 57
(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) Susan Deleeuw	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address 114798	Transaction ID: SA11AI.7395
	City State Zip Code	Amount of Each Receipt this Period 292.50
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
Name of Employer Blue Shield	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	

B.	Full Name (Last, First, Middle Initial) Ann DeRose	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address 113203	Transaction ID: SA11AI.7396
	City State Zip Code	Amount of Each Receipt this Period 292.50
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
Name of Employer Blue Shield	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	

C.	Full Name (Last, First, Middle Initial) Tushar Desai	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address 115087	Transaction ID: SA11AI.7397
	City State Zip Code	Amount of Each Receipt this Period 292.50
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
Name of Employer Blue Shield	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 382.50	

SUBTOTAL of Receipts This Page (optional)	877.50
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 57
	<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 12 / 31 / 2007
	Mailing Address emp 111504 50 Beale Street	Transaction ID: SA11AI.7399
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 326.30
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.10
	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 ▼ 637.39	

B.	Full Name (Last, First, Middle Initial) Marjorie Drake	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address emp 56271 50 Beale Street	Transaction ID: SA11AI.7401
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 130.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Occupation Blue Shield of California IFP Underwriting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) James Elliott	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address 115549	Transaction ID: SA11AI.7402
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 1300.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$100.00
	Name of Employer Occupation Blue Shield employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00	

SUBTOTAL of Receipts This Page (optional)	1756.30
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 57
	<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) Thomas Epstein	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address emp 110249 50 Beale Street	Transaction ID: SA11AI.7405
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 780.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$60.00
	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 ▼ 1560.00	

B.	Full Name (Last, First, Middle Initial) Jacqueline Espinoza	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address 115623	Transaction ID: SA11AI.7406
	City State Zip Code	Amount of Each Receipt this Period 292.50
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Occupation Blue Shield employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	

C.	Full Name (Last, First, Middle Initial) Kathryn M. Ferguson	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address emp 32319 50 Beale Street	Transaction ID: SA11AI.7408
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 195.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$15.00
	Name of Employer Occupation Blue Shield of California Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional)	1267.50
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 57
	<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) Carol Fogelman	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 7
	Mailing Address emp 32239 50 Beale Street	Transaction ID: SA11AI.7409
	City San Francisco State CA Zip Code 94105	Amount of Each Receipt this Period 141.18
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.86
	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 ▼ 279.56	

B.	Full Name (Last, First, Middle Initial) Joseph Foley	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 7
	Mailing Address 114742	Transaction ID: SA11AI.7410
	City State Zip Code	Amount of Each Receipt this Period 150.34
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$11.44
	Name of Employer Blue Shield Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 241.86	

C.	Full Name (Last, First, Middle Initial) Mark Gastineau	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 7
	Mailing Address 115296	Transaction ID: SA11AI.7412
	City State Zip Code	Amount of Each Receipt this Period 520.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$40.00
	Name of Employer Blue Shield Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 720.00	

SUBTOTAL of Receipts This Page (optional)	811.52
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 57

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

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

Mailing Address emp 42026
50 Beale Street

City State Zip Code
San Francisco CA 94105

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

Name of Employer Occupation
Blue Shield of California Vice President

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 695.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.7414

Amount of Each Receipt this Period

370.00

Payroll contribution per cycle \$25.00

B.

Full Name (Last, First, Middle Initial)
Ketan Gima

Mailing Address emp 112246
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 Manager

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

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.7415

Amount of Each Receipt this Period

650.00

Payroll contribution per cycle \$50.00

C.

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

Mailing Address 115621

City State Zip Code

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 ▼ 382.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.7416

Amount of Each Receipt this Period

292.50

Payroll contribution per cycle \$22.50

SUBTOTAL of Receipts This Page (optional)

1312.50

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 57
	<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) Douglas Grant		Date of Receipt
	Mailing Address emp 27417 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 7
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7419
Name of Employer Blue Shield of California		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	130.00
		Payroll contribution per cycle \$10.00	

B.	Full Name (Last, First, Middle Initial) Christy Gregg		Date of Receipt
	Mailing Address 022233		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 7
	City	State	Zip Code
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7421
	Name of Employer Blue Shield		Occupation employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 405.00	292.50
		Payroll contribution per cycle \$22.50	

C.	Full Name (Last, First, Middle Initial) Melissa Hall		Date of Receipt
	Mailing Address 115540		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 7
	City	State	Zip Code
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7424
	Name of Employer Blue Shield		Occupation employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 405.00	292.50
		Payroll contribution per cycle \$22.50	

SUBTOTAL of Receipts This Page (optional)	715.00
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 21 / 57
	<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 Harjo	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address emp 16340 50 Beale Street	Transaction ID: SA11AI.7427
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 130.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Occupation Blue Shield of California Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) Jeffrey Hermsillo	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address 114845	Transaction ID: SA11AI.7433
	City State Zip Code	Amount of Each Receipt this Period 292.50
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Occupation Blue Shield employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	

C.	Full Name (Last, First, Middle Initial) Brent Hitchings	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address 115569	Transaction ID: SA11AI.7437
	City State Zip Code	Amount of Each Receipt this Period 292.50
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Occupation Blue Shield employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	

SUBTOTAL of Receipts This Page (optional)	715.00
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 / 57
(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) Helena Hoffman		Date of Receipt MM / DD / YYYY 12 / 31 / 2007
Mailing Address emp 95671 50 Beale Street		Transaction ID: SA11AI.7438
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 143.00
Name of Employer Blue Shield of California	Occupation Employee	Payroll contribution per cycle \$11.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 286.00	

B.

Full Name (Last, First, Middle Initial) Stanford Hornbacher		Date of Receipt MM / DD / YYYY 12 / 31 / 2007
Mailing Address 016615		Transaction ID: SA11AI.7439
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 292.50
Name of Employer Blue Shield	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 ▼ 405.00	

C.

Full Name (Last, First, Middle Initial) Diana Huang		Date of Receipt MM / DD / YYYY 12 / 31 / 2007
Mailing Address emp 114587, 50 Beale Street		Transaction ID: SA11AI.7440
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 130.00
Name of Employer Blue Shield	Occupation employee	Payroll contribution per cycle \$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	565.50
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 57
	<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) Tony R. Ibarra		Date of Receipt	
	Mailing Address emp 112981 50 Beale Street		M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 7	
	City	State	Zip Code	Transaction ID: SA11AI.7441
	San Francisco	CA	94105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		195.00	
Name of Employer Blue Shield of California		Occupation Employee		Payroll contribution per cycle \$15.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		390.00		

B.	Full Name (Last, First, Middle Initial) Marianne Jackson		Date of Receipt	
	Mailing Address emp 112372 50 Beale Street		M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 7	
	City	State	Zip Code	Transaction ID: SA11AI.7444
	San Francisco	CA	94105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		750.75	
Name of Employer Blue Shield of California		Occupation Senior Vice President, Human Resources		Payroll contribution per cycle \$57.75
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1488.45		

C.	Full Name (Last, First, Middle Initial) Seth Jacobs		Date of Receipt	
	Mailing Address emp 16574 50 Beale Street		M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 7	
	City	State	Zip Code	Transaction ID: SA11AI.7448
	San Francisco	CA	94105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		292.50	
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 ▼		
		485.00		

SUBTOTAL of Receipts This Page (optional)	▶	1238.25
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 / 57

(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) Kathryn Jefcoat		Date of Receipt MM / DD / YYYY 12 / 31 / 2007		
	Mailing Address emp 95114 50 Beale Street		Transaction ID: SA11AI.7451		
	City San Francisco	State CA	Zip Code 94105	Amount of Each Receipt this Period 130.00	
	FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$10.00		
	Name of Employer Blue Shield of California	Occupation Director	Aggregate Year-to-Date 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Michael Johnson		Date of Receipt MM / DD / YYYY 12 / 31 / 2007		
	Mailing Address emp 111769 50 Beale Street		Transaction ID: SA11AI.7452		
	City San Francisco	State CA	Zip Code 94105	Amount of Each Receipt this Period 220.35	
	FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$16.95		
	Name of Employer Blue Shield of California	Occupation Employee	Aggregate Year-to-Date 437.75		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) David Joyner		Date of Receipt MM / DD / YYYY 12 / 31 / 2007		
	Mailing Address emp 19639 50 Beale Street		Transaction ID: SA11AI.7456		
	City San Francisco	State CA	Zip Code 94105	Amount of Each Receipt this Period 520.00	
	FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$40.00		
	Name of Employer Blue Shield of California	Occupation Vice President	Aggregate Year-to-Date 820.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)

870.35

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 57
(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)
Allison Kawamoto

Mailing Address 094997

City State Zip Code

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 ▼ 244.23

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.7457

Amount of Each Receipt this Period 151.19

Payroll contribution per cycle \$11.63

B.

Full Name (Last, First, Middle Initial)
Tina Kibler

Mailing Address 115267

City State Zip Code

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 ▼ 405.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.7459

Amount of Each Receipt this Period 292.50

Payroll contribution per cycle \$22.50

C.

Full Name (Last, First, Middle Initial)
Yun Kim

Mailing Address emp 109394
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 ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.7460

Amount of Each Receipt this Period 130.00

Payroll contribution per cycle \$10.00

SUBTOTAL of Receipts This Page (optional) ▶ **573.69**

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 26 / 57
	<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) Heidi Kunz	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address emp 112238 50 Beale Street	Transaction ID: SA11AI.7462
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 1481.26
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$114.22
	Name of Employer Blue Shield of California Occupation Chief Financial Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2940.07	

B.	Full Name (Last, First, Middle Initial) Nora Lam	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address 015642	Transaction ID: SA11AI.7464
	City State Zip Code	Amount of Each Receipt this Period 195.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$15.00
	Name of Employer Blue Shield Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00	

C.	Full Name (Last, First, Middle Initial) Lisa Lambert	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address emp 062157, 50 Beale Street	Transaction ID: SA11AI.7465
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 130.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Blue Shield Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	1806.26
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 27 / 57
	<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) Janice Levinsky	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address 111653	Transaction ID: SA11AI.7470
	City State Zip Code	Amount of Each Receipt this Period 195.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$15.00
Name of Employer Blue Shield	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

B.	Full Name (Last, First, Middle Initial) Colleen Lewis	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address emp 113832 50 Beale St.	Transaction ID: SA11AI.7473
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 145.86
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$11.22
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 ▼ 288.57	

C.	Full Name (Last, First, Middle Initial) Laura Lewis	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address 022384	Transaction ID: SA11AI.7474
	City State Zip Code	Amount of Each Receipt this Period 292.50
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
Name of Employer Blue Shield	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 472.50	

SUBTOTAL of Receipts This Page (optional)	633.36
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 / 57

(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)

Anthony Lipp

Mailing Address 004138

City State Zip Code

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 ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.7475

Amount of Each Receipt this Period

292.50

Payroll contribution per cycle \$22.50

B.

Full Name (Last, First, Middle Initial)

Christopher Long

Mailing Address emp 109838
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 ▼

422.54

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.7477

Amount of Each Receipt this Period

219.37

Payroll contribution per cycle \$15.68

C.

Full Name (Last, First, Middle Initial)

Kathleen M. Lucke

Mailing Address emp 111911
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 ▼

656.39

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.7479

Amount of Each Receipt this Period

333.97

Payroll contribution per cycle \$25.69

SUBTOTAL of Receipts This Page (optional)

845.84

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 / 57
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address emp 112179
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 ▼
650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.7481

Amount of Each Receipt this Period
325.00

Payroll contribution per cycle \$25.00

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

Mailing Address emp 109411
50 Beale Street

City State Zip Code
San Francisco CA 94105

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

Name of Employer Occupation
Blue Shield of California Employee

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
780.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.7482

Amount of Each Receipt this Period
390.00

Payroll contribution per cycle \$30.00

C. Full Name (Last, First, Middle Initial)
David Lytle

Mailing Address emp 109982
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 ▼
480.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.7483

Amount of Each Receipt this Period
220.00

Payroll contribution per cycle \$20.00

SUBTOTAL of Receipts This Page (optional) ► **935.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 57
	<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) Elinor Mackinnon	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address emp 113314, 50 Beale Street	Transaction ID: SA11AI.7484
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 650.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$50.00
	Name of Employer Blue Shield Occupation employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1197.61	

B.	Full Name (Last, First, Middle Initial) Fred J. Mann	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address emp 61151 50 Beale Street	Transaction ID: SA11AI.7485
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 130.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00
	Name of Employer Blue Shield of California Occupation Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) Paul Markovich	Date of Receipt MM / DD / YYYY 12 / 31 / 2007
	Mailing Address emp 16510 50 Beale Street	Transaction ID: SA11AI.7486
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 1001.00
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$77.00
	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 ▼ 1578.06	

SUBTOTAL of Receipts This Page (optional)	1781.00
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 / 57
(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) Patricia Mason		Date of Receipt MM / DD / YYYY 12 / 31 / 2007
Mailing Address emp 2508 50 Beale Street		Transaction ID: SA11AI.7488
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 130.00
Name of Employer Blue Shield of California	Occupation Employee	Payroll contribution per cycle \$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.

Full Name (Last, First, Middle Initial) Shelley McFarland		Date of Receipt MM / DD / YYYY 12 / 31 / 2007
Mailing Address emp 061236, 50 Beale Street		Transaction ID: SA11AI.7490
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 106.51
Name of Employer Blue Shield	Occupation employee	Payroll contribution per cycle \$8.12
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.63	

C.

Full Name (Last, First, Middle Initial) Lorie Merrill		Date of Receipt MM / DD / YYYY 12 / 31 / 2007
Mailing Address 095447		Transaction ID: SA11AI.7492
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 292.50
Name of Employer Blue Shield	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 ▼ 405.00	

SUBTOTAL of Receipts This Page (optional)	529.01
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 57

(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) Cathleen Murphy		Date of Receipt
	Mailing Address emp 113067, 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7497
Name of Employer Blue Shield		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="325.00"/>
		<input type="text" value="650.00"/>	Payroll contribution per cycle \$25.00

B.	Full Name (Last, First, Middle Initial) Jon Murphy		Date of Receipt
	Mailing Address emp 112151 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7498
Name of Employer Blue Shield of California		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="143.78"/>
		<input type="text" value="273.16"/>	Payroll contribution per cycle \$10.76

C.	Full Name (Last, First, Middle Initial) Debbie Naegle		Date of Receipt
	Mailing Address emp 16484 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7499
Name of Employer Blue Shield of California		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="426.01"/>
		<input type="text" value="835.47"/>	Payroll contribution per cycle \$32.77

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="894.79"/>
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 33 / 57
	<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) Paul Nicknig		Date of Receipt
	Mailing Address 112383		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City State Zip Code		Transaction ID: SA11AI.7500
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <input type="text" value="292.50"/>
	Name of Employer Blue Shield 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 ▼ <input type="text" value="405.00"/>	

B.	Full Name (Last, First, Middle Initial) Robert Novelli		Date of Receipt
	Mailing Address emp 111112 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City State Zip Code San Francisco CA 94105		Transaction ID: SA11AI.7501
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <input type="text" value="908.18"/>
	Name of Employer Blue Shield of California Occupation Senior Vice President		Payroll contribution per cycle \$ 69.86
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1793.01"/>	

C.	Full Name (Last, First, Middle Initial) William Panek		Date of Receipt
	Mailing Address emp 18535 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City State Zip Code San Francisco CA 94105		Transaction ID: SA11AI.7503
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <input type="text" value="130.00"/>
	Name of Employer Blue Shield of California Occupation Medical Director		Payroll contribution per cycle \$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1330.68"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 57
(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)
Lisa Parks

Mailing Address 075551

City State Zip Code

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 ▼ 405.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.7504

Amount of Each Receipt this Period 292.50

Payroll contribution per cycle \$22.50

B.

Full Name (Last, First, Middle Initial)
Diana Reynolds

Mailing Address 115295

City State Zip Code

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 ▼ 202.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.7513

Amount of Each Receipt this Period 146.25

Payroll contribution per cycle \$11.25

C.

Full Name (Last, First, Middle Initial)
Kathy Richards

Mailing Address emp 109053
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 Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.7514

Amount of Each Receipt this Period 650.00

Payroll contribution per cycle \$50.00

SUBTOTAL of Receipts This Page (optional) ► 1088.75

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 35 / 57
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Mika D. Riedinger		Date of Receipt	
	Mailing Address emp 27156 50 Beale Street		M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 7	
	City State Zip Code San Francisco CA 94105		Transaction ID: SA11AI.7515	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 220.82	
	Name of Employer Occupation Blue Shield of California Employee		Payroll contribution per cycle \$18.19	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 455.19	

B.	Full Name (Last, First, Middle Initial) Karen Rinaldi		Date of Receipt	
	Mailing Address emp 111645 50 Beale Street		M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 7	
	City State Zip Code San Francisco CA 94105		Transaction ID: SA11AI.7516	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 160.95	
	Name of Employer Occupation Blue Shield of California Employee		Payroll contribution per cycle \$12.38	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 319.49	

C.	Full Name (Last, First, Middle Initial) Thad Roake		Date of Receipt	
	Mailing Address 115536		M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 7	
	City State Zip Code San Francisco CA 94105		Transaction ID: SA11AI.7517	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1667.28	
	Name of Employer Occupation Blue Shield employee		Payroll contribution per cycle \$77.72	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2220.08	

SUBTOTAL of Receipts This Page (optional)	2049.05
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 57

(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) Norvita Robinson		Date of Receipt
	Mailing Address emp 111723, 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Shield		Occupation employee	Transaction ID: SA11AI.7611
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="260.00"/>	<input type="text" value="130.00"/>
			Payroll contribution per cycle \$10.00

B.	Full Name (Last, First, Middle Initial) Garry Ronco		Date of Receipt
	Mailing Address 115653		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer Blue Shield		Occupation employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="405.00"/>	<input type="text" value="292.50"/>
			Payroll contribution per cycle \$22.50

C.	Full Name (Last, First, Middle Initial) Mark Sachs		Date of Receipt
	Mailing Address 114287		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer Blue Shield		Occupation employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="270.00"/>	<input type="text" value="195.00"/>
			Payroll contribution per cycle \$15.00

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="617.50"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 57
(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)
Joseph Safran

Mailing Address emp 109164, 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield Occupation employee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 31 / 2007

Transaction ID: SA11AI.7524

Amount of Each Receipt this Period 260.00

Payroll contribution per cycle \$20.00

B.

Full Name (Last, First, Middle Initial)
Lorne Salter

Mailing Address 115484

City State Zip Code

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 ▼ 292.50

Date of Receipt 12 / 31 / 2007

Transaction ID: SA11AI.7526

Amount of Each Receipt this Period 247.50

Payroll contribution per cycle \$22.50

C.

Full Name (Last, First, Middle Initial)
Christopher K. Seides

Mailing Address emp 95748
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation Employee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2007

Transaction ID: SA11AI.7530

Amount of Each Receipt this Period 130.00

Payroll contribution per cycle \$10.00

SUBTOTAL of Receipts This Page (optional) ▶ **637.50**

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

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

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

FOR LINE NUMBER: PAGE 38 / 57
(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)
David Seldin
 Mailing Address 115072
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Shield Occupation employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00
 Date of Receipt 12 / 31 / 2007
Transaction ID: SA11AI.7531
 Amount of Each Receipt this Period 130.00
 Payroll contribution per cycle \$10.00

B. Full Name (Last, First, Middle Initial)
Jason Sims
 Mailing Address 112432
 City State Zip Code
 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 ▼ 210.00
 Date of Receipt 12 / 31 / 2007
Transaction ID: SA11AI.7533
 Amount of Each Receipt this Period 195.00
 Payroll contribution per cycle \$15.00

C. Full Name (Last, First, Middle Initial)
Deborah Smith
 Mailing Address 112636
 City State Zip Code
 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 ▼ 297.00
 Date of Receipt 12 / 31 / 2007
Transaction ID: SA11AI.7534
 Amount of Each Receipt this Period 214.50
 Payroll contribution per cycle \$16.50

SUBTOTAL of Receipts This Page (optional) ► 539.50
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 39 / 57
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Alan Sokolow
Mailing Address 115614
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 ▼ 900.00
Date of Receipt 12 / 31 / 2007
Transaction ID: SA11AI.7535
Amount of Each Receipt this Period 650.00
Payroll contribution per cycle \$50.00

B. Full Name (Last, First, Middle Initial)
Robert Spector
Mailing Address emp 114420, 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 ▼ 483.60
Date of Receipt 12 / 31 / 2007
Transaction ID: SA11AI.7537
Amount of Each Receipt this Period 245.70
Payroll contribution per cycle \$18.70

C. Full Name (Last, First, Middle Initial)
Nancy Stalker
Mailing Address emp 16479 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, Pharmacy Services
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 780.00
Date of Receipt 12 / 31 / 2007
Transaction ID: SA11AI.7540
Amount of Each Receipt this Period 390.00
Payroll contribution per cycle \$30.00

SUBTOTAL of Receipts This Page (optional) ► 1285.70
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 40 / 57
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Robert F. Stephenson		Date of Receipt
	Mailing Address emp 32257 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 7
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7542
Name of Employer Blue Shield of California		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	130.00
		Payroll contribution per cycle \$10.00	

B.	Full Name (Last, First, Middle Initial) Susan Stephenson		Date of Receipt
	Mailing Address emp 109942, 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 7
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7543
Name of Employer Blue Shield		Occupation employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	130.00
		Payroll contribution per cycle \$10.00	

C.	Full Name (Last, First, Middle Initial) Mary C. St John		Date of Receipt
	Mailing Address emp 95485 50 Beale Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 7
	City	State	Zip Code
	San Francisco	CA	94105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7544
Name of Employer Blue Shield of California		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00	325.00
		Payroll contribution per cycle \$25.00	

SUBTOTAL of Receipts This Page (optional)	585.00
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 41 / 57
(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)
Terrance Stover

Mailing Address 115522

City State Zip Code

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 ▼ 405.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.7545

Amount of Each Receipt this Period 292.50

Payroll contribution per cycle \$22.50

B. Full Name (Last, First, Middle Initial)
Malcolm Strohson Jr.

Mailing Address 115599

City State Zip Code

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 ▼ 405.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.7546

Amount of Each Receipt this Period 292.50

Payroll contribution per cycle \$22.50

C. Full Name (Last, First, Middle Initial)
Lyle Swallow

Mailing Address emp 18612
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 Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.7547

Amount of Each Receipt this Period 520.00

Payroll contribution per cycle \$40.00

SUBTOTAL of Receipts This Page (optional) ► **1105.00**

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 42 / 57
(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)
Charles and Anne Sweeris

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 BSC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 08 / 23 / 2007

Transaction ID: SA11AI.7686

Amount of Each Receipt this Period: 1500.00

Political Contribution

B.

Full Name (Last, First, Middle Initial)
James Taylor

Mailing Address emp 112237, 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield Occupation employee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 31 / 2007

Transaction ID: SA11AI.7548

Amount of Each Receipt this Period: 130.00

Payroll contribution per cycle \$10.00

C.

Full Name (Last, First, Middle Initial)
Eric Terndrup

Mailing Address emp 114199 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 of California Occupation Employee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 633.37

Date of Receipt: 12 / 31 / 2007

Transaction ID: SA11AI.7549

Amount of Each Receipt this Period: 320.71

Payroll contribution per cycle \$24.67

SUBTOTAL of Receipts This Page (optional) ► 1950.71

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 43 / 57
(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)
 Ryan Thompson
 Mailing Address emp 114592, 50 Beale Street
 City State Zip Code
 San Francisco CA 94105
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 7
Transaction ID: SA11AI.7550
 Amount of Each Receipt this Period
 195.00
 Payroll contribution per cycle \$30.00
 Name of Employer Occupation
 Blue Shield employee
 FEC ID number of contributing federal political committee. **C**
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 290.00

B. Full Name (Last, First, Middle Initial)
 Dennis M. Toohey
 Mailing Address emp 113255
 50 Beale Street
 City State Zip Code
 San Francisco CA 94105
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 7
Transaction ID: SA11AI.7551
 Amount of Each Receipt this Period
 130.00
 Payroll contribution per cycle \$10.00
 Name of Employer Occupation
 Blue Shield of California Employee
 FEC ID number of contributing federal political committee. **C**
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 260.00

C. Full Name (Last, First, Middle Initial)
 Joanne Trenam
 Mailing Address emp 020511, 50 Beale Street
 City State Zip Code
 San Francisco CA 94105
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 7
Transaction ID: SA11AI.7553
 Amount of Each Receipt this Period
 130.00
 Payroll contribution per cycle \$10.00
 Name of Employer Occupation
 Blue Shield employee
 FEC ID number of contributing federal political committee. **C**
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 260.00

SUBTOTAL of Receipts This Page (optional) ► 455.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 44 / 57
(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
 12 / 31 / 2007
Transaction ID: SA11AI.7557
 Amount of Each Receipt this Period
 268.84
 Payroll contribution per cycle \$20.68
 Name of Employer Blue Shield of California Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 532.78
 FEC ID number of contributing federal political committee. **C**

B. Full Name (Last, First, Middle Initial)
 Robert Veeneman
 Mailing Address 095413
 City San Francisco State CA Zip Code 94105
 Date of Receipt MM / DD / YYYY
 12 / 31 / 2007
Transaction ID: SA11AI.7559
 Amount of Each Receipt this Period
 1083.29
 Payroll contribution per cycle \$83.33
 Name of Employer Blue Shield Occupation employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2083.25
 FEC ID number of contributing federal political committee. **C**

C. Full Name (Last, First, Middle Initial)
 Conrad Vilafuerte
 Mailing Address emp 113903, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt MM / DD / YYYY
 12 / 31 / 2007
Transaction ID: SA11AI.7561
 Amount of Each Receipt this Period
 130.00
 Payroll contribution per cycle \$10.00
 Name of Employer Blue Shield Occupation employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00
 FEC ID number of contributing federal political committee. **C**

SUBTOTAL of Receipts This Page (optional) ► 1482.13
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 45 / 57
	<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) Robert Wadsworth	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 7
	Mailing Address emp 18560 50 Beale Street	Transaction ID: SA11AI.7563
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 273.30
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$18.33
	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 ▼ 507.44	

B.	Full Name (Last, First, Middle Initial) Peter Walker	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 7
	Mailing Address emp 109506 50 Beale Street	Transaction ID: SA11AI.7564
	City State Zip Code San Francisco CA 94105	Amount of Each Receipt this Period 217.23
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$16.71
	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 ▼ 415.19	

C.	Full Name (Last, First, Middle Initial) Troy Ward	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 7
	Mailing Address 114007	Transaction ID: SA11AI.7565
	City State Zip Code	Amount of Each Receipt this Period 292.50
	FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50
	Name of Employer Occupation Blue Shield employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	

SUBTOTAL of Receipts This Page (optional)	783.03
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 46 / 57
(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)
Janice Washburn
Mailing Address 115611
City State Zip Code
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 ▼ 405.00
Date of Receipt: 12 / 31 / 2007
Transaction ID: SA11AI.7566
Amount of Each Receipt this Period: 292.50
Payroll contribution per cycle \$22.50

B. Full Name (Last, First, Middle Initial)
Diane Watts
Mailing Address emp 113379, 50 Beale Street
City State Zip Code
San Francisco CA 94105
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Shield Occupation employee
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 12 / 31 / 2007
Transaction ID: SA11AI.7567
Amount of Each Receipt this Period: 260.00
Payroll contribution per cycle \$20.00

C. Full Name (Last, First, Middle Initial)
Mark Weideman
Mailing Address 114691 50 Beale St
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 ▼ 1020.00
Date of Receipt: 12 / 31 / 2007
Transaction ID: SA11AI.7568
Amount of Each Receipt this Period: 520.00
Payroll contribution per cycle \$40.00

SUBTOTAL of Receipts This Page (optional) ► 1072.50
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 47 / 57
(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)
 Steven Weiler
 Mailing Address emp 11314, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2007
Transaction ID: SA11AI.7569
 Amount of Each Receipt this Period 130.00
 Payroll contribution per cycle \$10.00
 Name of Employer Blue Shield Occupation employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 260.00
 FEC ID number of contributing federal political committee. **C**

B. Full Name (Last, First, Middle Initial)
 Bonnie Wells
 Mailing Address emp 113298, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2007
Transaction ID: SA11AI.7570
 Amount of Each Receipt this Period 130.00
 Payroll contribution per cycle \$10.00
 Name of Employer Blue Shield of California Occupation Employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 260.00
 FEC ID number of contributing federal political committee. **C**

C. Full Name (Last, First, Middle Initial)
 Noel Whitman
 Mailing Address 114963
 City State Zip Code
 Date of Receipt 12 / 31 / 2007
Transaction ID: SA11AI.7572
 Amount of Each Receipt this Period 292.50
 Payroll contribution per cycle \$22.50
 Name of Employer Blue Shield Occupation employee
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 405.00
 FEC ID number of contributing federal political committee. **C**

SUBTOTAL of Receipts This Page (optional) ▶ **552.50**
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 48 / 57
(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)
 Ms Janet D. Widmann
 Mailing Address emp 111756
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2007
Transaction ID: SA11AI.7573
 Amount of Each Receipt this Period 280.00
 Payroll contribution per cycle \$20.00
 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 ▼ 540.00

B. Full Name (Last, First, Middle Initial)
 Ms Fiona M. Wilmot
 Mailing Address emp 111587
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 Date of Receipt 12 / 31 / 2007
Transaction ID: SA11AI.7576
 Amount of Each Receipt this Period 247.78
 Payroll contribution per cycle \$19.06
 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 ▼ 489.31

C. Full Name (Last, First, Middle Initial)
 Jered Wilson
 Mailing Address 115412
 City State Zip Code
 Date of Receipt 12 / 31 / 2007
Transaction ID: SA11AI.7577
 Amount of Each Receipt this Period 292.50
 Payroll contribution per cycle \$22.50
 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 ▼ 405.00

SUBTOTAL of Receipts This Page (optional) ► **820.28**
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 57
(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)
Jason Wong

Mailing Address emp 112700, 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield Occupation employee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2007

Transaction ID: SA11AI.7582

Amount of Each Receipt this Period 130.00

Payroll contribution per cycle \$10.00

B.

Full Name (Last, First, Middle Initial)
Amy Yao

Mailing Address 115363

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 ▼ 562.50

Date of Receipt 12 / 31 / 2007

Transaction ID: SA11AI.7584

Amount of Each Receipt this Period 292.50

Payroll contribution per cycle \$22.50

C.

Full Name (Last, First, Middle Initial)
John Yao

Mailing Address emp 11926
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation Senior Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 292.50

Date of Receipt 12 / 31 / 2007

Transaction ID: SA11AI.7586

Amount of Each Receipt this Period 292.50

Payroll contribution per cycle \$22.50

SUBTOTAL of Receipts This Page (optional) ▶ **715.00**

TOTAL This Period (last page this line number only) ▶ **43933.32**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 50 / 57
	(check only one)	
<input 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 checked="" 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) FRIENDS OF DICK DURBIN COMMITTEE		Date of Receipt
	Mailing Address 2443 Fillmore Street # 333		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	San Francisco	CA	94115
	FEC ID number of contributing federal political committee.		C C00148999
Name of Employer		Occupation	Transaction ID: SA16.7694
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="2000.00"/>	
			Amount of Each Receipt this Period <input type="text" value="2000.00"/>
			Refund contribution from Committee

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2000.00"/>

**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)

<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	Transaction ID: SB23.7646 Date of Disbursement 07 / 29 / 2007
	Mailing Address P.O. Box 261060	
	City Los Angeles State CA Zip Code 90026	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Political Contribution	Category/ Type
	Candidate Name	
	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) ▼

B.	Full Name (Last, First, Middle Initial) BECERRA FOR CONGRESS	Transaction ID: SB23.7650 Date of Disbursement 11 / 29 / 2007
	Mailing Address P.O. Box 261060	
	City Los Angeles State CA Zip Code 90026	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Political Contribution	Category/ Type
	Candidate Name	
	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) ▼

C.	Full Name (Last, First, Middle Initial) BLUEGRASS COMMITTEE	Transaction ID: SB23.7669 Date of Disbursement 08 / 22 / 2007
	Mailing Address 400 N Capitol St NW #585 #585	
	City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Political Contribution	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	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) BLUEGRASS COMMITTEE</p> <p>Mailing Address 400 N Capitol St NW #585 #585</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7673</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) CONGRESSMAN WAXMAN CAMPAIGN COMMITTEE</p> <p>Mailing Address 8665 Wilshire Blvd. #220</p> <p>City Beverly Hills State CA Zip Code 90211</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7631</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) DREIER FOR CONGRESS COMMITTEE</p> <p>Mailing Address P.O. BOX 505</p> <p>City UPLAND State CA Zip Code 91785</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7630</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7</p> <p>Amount of Each Disbursement this Period 1000.00</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>4000.00</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)
EVERY REPUBLICAN IS CRUCIAL (ERICPAC)

Mailing Address 25 East Main Street Suite 200

City Richmond State VA Zip Code 23219

Purpose of Disbursement
Political Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.7653

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	2	/	2	0	0	7

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
Friends of Jay Rockefeller

Mailing Address 110-B East Broad Street

City Falls Church State VT Zip Code 22046

Purpose of Disbursement
Political Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.7679

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	0	/	2	0	0	7

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial)
Friends of Jay Rockefeller

Mailing Address 110-B East Broad Street

City Falls Church State VT Zip Code 22046

Purpose of Disbursement
Political Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.7682

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	8	/	2	0	0	7

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional) ►

5100.00

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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) Friends of Jay Rockefeller</p> <p>Mailing Address 110-B East Broad Street</p> <p>City Falls Church State VT Zip Code 22046</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7683</p> <p>Date of Disbursement 08 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 124.00</p>
<p>B. Full Name (Last, First, Middle Initial) FRIENDS OF RAHM EMANUEL</p> <p>Mailing Address P.O. Box 101124</p> <p>City Chicago State IL Zip Code 60610</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7659</p> <p>Date of Disbursement 11 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) GLACIER PAC</p> <p>Mailing Address 818 Connecticut Ave. NW Suite 1100</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7638</p> <p>Date of Disbursement 09 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 1500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2624.00

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) MAJORITY COMMITTEE POLITICAL ACTION COMMITTEE - MC PAC</p> <p>Mailing Address PO BOX 10134</p> <p>City BAKERSFIELD State CA Zip Code 93389</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.7657</p> <p>Date of Disbursement 11 / 12 / 2007</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) MARY BONO MACK COMMITTEE</p> <p>Mailing Address P.O. Box 3370</p> <p>City Palm Springs State CA Zip Code 92263</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.7661</p> <p>Date of Disbursement 11 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) MCCRERY FOR CONGRESS COMMITTEE</p> <p>Mailing Address Post Office Box 52956 333 Texas Street Suite 1900</p> <p>City Shreveport State LA Zip Code 71135</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.7637</p> <p>Date of Disbursement 11 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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) MONTANA DEMOCRATIC PARTY	Transaction ID: SB23.7655 Date of Disbursement
	Mailing Address PO Box 802	<input type="text" value="11"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Helena State MT Zip Code 59624	Amount of Each Disbursement this Period
	Purpose of Disbursement Political Contribution	<input type="text" value="2500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PAC TO THE FUTURE	Transaction ID: SB23.7633 Date of Disbursement
	Mailing Address PMB 3230 268 Bush Street	<input type="text" value="11"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City San Francisco State CA Zip Code 94104	Amount of Each Disbursement this Period
	Purpose of Disbursement Political Contribution	<input type="text" value="5000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) GEORGE FOR CONGRESS RADANOVICH	Transaction ID: SB23.7641 Date of Disbursement
	Mailing Address 1111 J Street	<input type="text" value="08"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Modesto State CA Zip Code 95354	Amount of Each Disbursement this Period
	Purpose of Disbursement Political Contribution	<input type="text" value="1000.00"/>
	Candidate Name GEORGE FOR CONGRESS RADANOVICH	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: CA District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="8500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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) RICHARDSON FOR CONGRESS</p> <p>Mailing Address 1212 S VICTORY BLVD</p> <p>City BURBANK State CA Zip Code 91502</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7674</p> <p>Date of Disbursement 08 / 13 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) SOLIS FOR CONGRESS</p> <p>Mailing Address 6380 Wilshire Blvd. #1612</p> <p>City Los Angeles State CA Zip Code 90048</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7639</p> <p>Date of Disbursement 08 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) VOTER EDUCATION AND REGISTRATION FUND</p> <p>Mailing Address 555 Capitol Mall Ste. 440</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Voter Registration & Education</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7667</p> <p>Date of Disbursement 08 / 22 / 2007</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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

35724.00