REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
BluePAC (Capital, Independance, Northeastern and Western Pa. Blue Cross Plans)

ADDRESS (number and street) ☐ Check if different than previously reported
Pennsylvania Blue Cross Plans PAC
c/o Brenda McLaughlin

CITY, STATE and ZIP CODE
2500 ELMERTON AVENUE
HARRISBURG PA 17177

2. FEC IDENTIFICATION NUMBER
C00270967

3. [X] This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Jul 13 1 29 PM '94

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report

[X] July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

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

☐ Termination Report

Monthly Report Due On:

☐ February 20	☐ June 20	☐ October 20
☐ March 20	☐ July 20	☐ November 20
☐ April 20	☐ August 20	☐ December 20
☐ May 20	☐ September 20	☐ January 31

☐ Twelfth day report preceding ____ ____ ____ (Type of Election) election on ____ ____ in the State of ____ ____

☐ Thirtieth day report following the General Election on ____ ____ in the State of ____ ____.

(b) Is this Report an Amendment? ☐ YES [X] NO

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period 4/21/94 through 6/30/94		
6. (a)	Cash on Hand January 1, 19 94		$ 19,136.59
(b)	Cash on Hand at Beginning of Reporting Period	$ 9,836.34	
(c)	Total Receipts (from Line 19)	$ 21,543.10	$ 47,424.39
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 31,379.44	$ 66,560.98
7.	Total Disbursements (from Line 30)	$ 15,075.00	$ 50,256.54
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 16,304.44	$ 16,304.44
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
BRENDA H. MCLAUGHLIN

Signature of Treasurer
Brenda H. McLaughlin

Date
7/15/94

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

FEC FORM 3X
(revised 9/93)

9 4 0 3 9 1 2 0 4 2 3

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

(revised 1/1/91)

NAME OF COMMITTEE: BluePAC Pennsylvania Blue Cross Plans PAC

REPORT COVERING PERIOD FROM 4/21/94 TO: 6/30/94

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	5,766.35	8,226.71
ii. Unitemized	13,976.75	37,397.68
iii. Total (add i and ii) ➤	19,743.10	45,624.39
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a iii, b and c) ➤	19,743.10	45,624.39
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Nonfederal Account for Joint Activity	1,800.00	1,800.00
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	21,543.10	47,424.39
20. Total Federal Receipts (subtract line 18 from line 19) ➤	21,543.10	47,424.39
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures		
c. Total Operating Expenditures (add a i, a ii, and b) ➤		
22. Transfers to Affiliated/Other Party Committees		2,931.54
23. Contributions to Federal Candidates/Committees and Other Political Committees	4,700.00	11,250.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (add a, b and c) ➤		
29. Other Disbursements	10,375.00	36,075.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	15,075.00	50,256.54
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	15,075.00	50,256.54
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	21,543.10	47,424.39
33. Total Contribution Refunds (from line 28d)	0	0
34. Net Contributions (other than loans)(subtract line 33 from 32)	21,543.10	47,424.39
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	0	0
36. Offsets to Operating Expenditures (from line 15)	0	0
37. Net Operating Expenditures (subtract line 36 from 35) ➤	0	0

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 6

FOR LINE NUMBER 11.a.i.

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NAME OF COMMITTEE (In Full)

BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
JAMES MEAD 201 HEARTH ROAD CAMP HILL PA 17011 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	CAPITAL BLUE CROSS Occupation: PRESIDENT Aggregate Year-to-Date > $ 860.00	PAYROLL DEDUCTION	$150.00
JOHN DADDIS 8 GLENLAKE DRIVE MEDFORD NJ 08055 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	INDEPENDENCE BLUE CROSS (I.B.C.) Occupation: SR. VICE PRESIDENT Aggregate Year-to-Date > $ 500.11	PAYROLL DEDUCTION	192.35
G. FRED DIBONA, JR. 637 HEATHER LANE BRYN MAWR, PA 19010 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C. Occupation: PRESIDENT Aggregate Year-to-Date > $ 650.00	PAYROLL DEDUCTION	250.00
JOHN G. FOOS 1016 LORIEN DRIVE GWENEDD VALLEY PA 19437 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C. Occupation: CHIEF FINANCIAL OFFICER Aggregate Year-to-Date > $ 450.00	PAYROLL DEDUCTION	175.00
ROBERT A. MCKEOWN 608 BRYN MAWR HADDONFIELD NJ 08033 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C Occupation: SR. VICE PRESIDENT Aggregate Year-to-Date > $ 650.00	PAYROLL DEDUCTION	250.00
CHRISTOPHER BUTLER 1 BRAMPTON ROAD MALVERN PA 19355 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C. Occupation: SR. VICE PRESIDENT Aggregate Year-to-Date > $ 520.00	PAYROLL DEDUCTION	240.00
VAIL GARVIN 399 BETSY LANE WARMINSTER PA 18974 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C. Occupation: SR. V.P. Aggregate Year-to-Date > $ 374.40	PAYROLL DEDUCTION	144.00

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

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

SCHEDULE A ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
JOHN ZAMZOW 231 CHESWOLD LANE HAVERFORD PA 19041 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	KEYSTONE HEALTH PLAN EAST Occupation: SR. V.P. Aggregate Year-to-Date > $ 390.00	PAYROLL DEDUCTION	$180.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
CHARLES R. BARKER SCOT & LOG CABIN ROAD PERKASKIE PA 18944 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C. Occupation: SR. DIRECTOR Aggregate Year-to-Date > $ 320.00	PAYROLL DEDUCTION	125.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
ROYAL E. BROWN 1429 SOUTH 15TH STREET PHILADELPHIA PA 19146 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C. Occupation: SR. DIRECTOR Aggregate Year-to-Date > $ 260.00	PAYROLL DEDUCTION	100.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT L. ENGLISH 4 LAMPLIGHTER LANE SIMMONS NJ 08088 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C. Occupation: VICE PRESIDENT Aggregate Year-to-Date > $ 250.00	PAYROLL DEDUCTION	100.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
KATHRYN M. FARLEY 315 VALLEY FORGE ROAD #2A DEVON PA 19333 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C. Occupation: VICE PRESIDENT Aggregate Year-to-Date > $ 260.00	PAYROLL DEDUCTION	100.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT J. FASCIA 703 COUNTRY CLUB PARKWAY MT LAUREL NJ 08054 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C. Occupation: SR. VICE PRESIDENT Aggregate Year-to-Date > $ 260.00	PAYROLL DEDUCTION	100.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
JOSEPH A. FRICK 7 MOORE CIRCLE MEDIA PA 19063 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C. Occupation: VICE PRESIDENT Aggregate Year-to-Date > $ 295.00	PAYROLL DEDUCTION	125.00

SUBTOTAL of Receipts This Page (optional) >

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

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Blue PAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. MICHAEL A. GREEN 517 BRIGHTS LANE PENLLYN PA 19422 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C. Occupation: VICE PRESIDENT Aggregate Year-to-Date > $ 255.00	PAYROLL DEDUCTION	$100.00
B. WILLIAM P. HACCETT 436 KINGS HIGHWAY EAST HADDONFIELD NJ 08033 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C. Occupation: VICE PRESIDENT Aggregate Year-to-Date > $ 320.00	PAYROLL DEDUCTION	125.00
C. ROBERT P. HUGHES 904 WESTDALE AVENUE SWARTHMORE PA 19081 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C. Occupation: SR. DIRECTOR Aggregate Year-to-Date > $ 255.00	PAYROLL DEDUCTION	100.00
D. ALTON F. KNIGHT, JR. 44 LINCOLN AVENUE YEADON PA 19050 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C. Occupation: VICE PRESIDENT Aggregate Year-to-Date > $ 260.00	PAYROLL DEDUCTION	100.00
E. JOSEPH A. NOLAN 2938 SUNSET AVENUE NORRISTOWN PA 19403 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C. Occupation: V.P.-CONTROLLER Aggregate Year-to-Date > $ 320.00	PAYROLL DEDUCTION	125.00
F. RUTGER V. VAN ZANTEN 266 FRIENDSHIP DRIVE PAOLI PA 19301 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C. Occupation: VICE PRESIDENT Aggregate Year-to-Date > $ 325.00	PAYROLL DEDUCTION	125.00
G. ANTHONY PANZETTA 1055 LITTLE ROAD WASHINGTON CROSS PA 18944 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	TAO, INC. Occupation: CEO Aggregate Year-to-Date > $ 312.00	PAYROLL DEDUCTION	130.00

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

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

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NAME OF COMMITTEE (In Full)

BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. RICHARD J. GILFILLAN 93 MOUNT LUCAS ROAD PRONCETON NJ 08540 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	KEYSTONE HEALTH PLAN EAST (KHP EAST) Occupation: SR. VICE PRESIDENT Aggregate Year-to-Date $ 210.00	PAYROLL DEDUCTION	$120.00
B. THOMAS F. PAPPALARDO 240 TALL PINES DRIVE SEWELL NJ 08080-1105 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	KHP EAST Occupation: SR. VICE PRESIDENT Aggregate Year-to-Date $ 325.00	PAYROLL DEDUCTION	150.00
C. JOSEPH N. ROMANO 30 DOUGLASS ROAD LANSDALE PA 19446 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	KHP EAST Occupation: VICE PRESIDENT Aggregate Year-to-Date $ 260.00	PAYROLL DEDUCTION	120.00
D. BRUCE W. HERDMAN 2126 LOMBARD STREET PHILADELPHIA PA 19146 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	KHP EAST Occupation: VICE PRESIDENT Aggregate Year-to-Date $ 210.00	PAYROLL DEDUCTION	120.00
E. GERALD F. ECK 620 COLONIAL DRIVE HORSHAM PA 19044 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C. Occupation: DIRECTOR Aggregate Year-to-Date $ 250.00	6/28/94	250.00
F. GREORGE C. THOMAS 115 PENNSYLVANIA AVENUE BRYN MAWR PA 19010 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C. Occupation: SR. PROGRAM ANALYST Aggregate Year-to-Date $ 210.00	6/28/94	210.00
G. MARY C. TRUEMAN 1525 BRIAN DRIVE WEST CHESTER PA 19380 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C. Occupation: MANAGER Aggregate Year-to-Date $ 250.00	6/28/94	250.00

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

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. DANIEL R. HOLTZ 1502 OAK STREET OAKMONT PA 15139 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	BLUE CROSS OF WESTERN PENNSYLVANIA (BCWP) VICE PRESIDENT Aggregate Year-to-Date $ 240.00	PAYROLL DEDUCTION	$100.00
B. CHRISTINE KOBUS 5 FIELDVIEW LANE PITTSBURGH PA 15215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	BCWP VICE PRESIDENT Aggregate Year-to-Date $ 240.00	PAYROLL DEDUCTION	100.00
C. DONNA LISANTI 1100 LIBERTY AVENUE #1003 PITTSBURGH PA 15222 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	BCWP VICE PRESIDENT Aggregate Year-to-Date $ 300.00	PAYROLL DEDUCTION	125.00
D. EUGENE SUSI 1347 MAIN STREET PITTSBURGH PA 15215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	BCWP VICE PRESIDENT Aggregate Year-to-Date $ 300.00	PAYROLL DEDUCTION	125.00
E. GUS GEORGIADIS 706 HIGHPOINT DRIVE WEXFORD PA 15090 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	BCWP SR. VICE PRESIDENT Aggregate Year-to-Date $ 245.00	PAYROLL DEDUCTION	105.00
F. KEITH K. KAPPMEYER 203 NORTH WOODLAND ROAD PITTSBURGH PA 15232 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	BCWP VICE PRESIDENT Aggregate Year-to-Date $ 375.00	PAYROLL DEDUCTION	305.00
G. WILLIAM LOWRY 1054 NORSIS DRIVE PITTSBURGH PA 15220 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	BCWP vice president Aggregate Year-to-Date $ 430.00	PAYROLL DEDUCTION	375.00

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

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

9 4 0 3 9 1 2 0 4 2 9

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
Blue PAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. ROBERT SCHULER 177 MCMICHAEL ROAD CARNEGIE PA 15106 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	BCWP EXECUTIVE V.P. Aggregate Year-to-Date $ 300.00	PAYROLL DEDUCTION	$125.00
B. BARABARA J. CREGUS 210 PAWN DRIVE HARLEYSVILLE PA 19438 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	I.B.C. MANAGER Aggregate Year-to-Date $ 260.00	PAYROLL DEDUCTION	150.00
C. Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		
D. Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		
E. Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		
F. Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		
G. Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		

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

TOTAL This Period (last page this line number only) $5,766.35

9 4 0 3 7 1 2 0 4 3 0

RECEIPT SCHEDULE H3
(effective 1/1/91)

TRANSFERS FROM NON-FEDERAL ACCOUNTS

FOR LINE 1B

NAME OF COMMITTEE: BluePAC Pennsylvania Blue Cross Plans PAC

TOTAL AMOUNT TRANSFERRED

NAME OF ACCOUNT: BluePAC State Cash Account

DATE OF RECEIPT: 4/25/94

$ 1,800.00

	BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive	1,800.00		
ii) Direct Fundraising (List Events-Amount for Each)			
a)			
b)			
c)			
d)			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a)			
b)			
c)			
d)			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support			

NAME OF ACCOUNT:

DATE OF RECEIPT:

$

	BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive			
ii) Direct Fundraising (List Events-Amount for Each)			
a)			
b)			
c)			
d)			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a)			
b)			
c)			
d)			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support			

	TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DCS	
SUBTOTAL THIS PAGE				
TOTAL THIS PERIOD				

9 4 0 3 9 1 2 0 4 3 1

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. DEMOCRATIC CONGRESSIONAL DINNER COMMITTEE P O BOX 2884 WASHINGTON DC 20013	CONTRIBUTION-HOUSE,PA Disbursement for: Primary General Other (specify)	4/25/94	$750.00
B. CarePAC 1310 G STREET NW WASHINGTON DC 20005	CONTRIBUTION-PAC Disbursement for: Primary General Other (specify)	4/26/94 6/14/94	2,000.00 750.00
C. SANTORUM'94 530 WALNUT STREET SUITE 1450 PHILADELPHIA PA 19106	CONTRIBUTION-SENATE,PA Disbursement for: Primary General Other (specify)	6/8/94 6/30/94	500.00 500.00
D. FRIENDS OF CONGRESSMAN TIM HOLDEN 302 MAHANTANGO STREET POTTSVILLE PA 17901	CONTRIBUTION-HOUSE, PA Disbursement for: Primary General Other (specify)	6/17/94	200.00
E. COYNE FOR CONGRESS COMMITTEE P O BOX 2891 PITTSBURGH PA 15230-2891	CONTRIBUTION-HOUSE,PA Disbursement for: Primary General Other (specify)	6/17/94	500.00
F. PEOPLE FOR ENGLISH 530 WEST SIXTH STREET ERIE, PA 16507	CONTRIBUTION HOUSE,PA Disbursement for: Primary General Other (specify)	6/27/94	250.00
G. CITIZENS FOR MOFFORD 707 GRANT STREET PITTSBURGH PA 15219	RETURNED CONTRIBUTION-SENATE,PA Disbursement for: Primary General Other (specify)	6/30/94	(500.00)
H. COYNE FOR CONGRESS 555 NEW JERSEY AVENUE NW WASHINGTON DC 20001	RETURNED CONTRIBUTION-HOUSE,PA Disbursement for: Primary General Other (specify)	6/30/94	(250.00)
I.	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

TOTAL This Period (last page this line number only) $4,700.00

9 4 0 5 9 1 2 5 4 3 2

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FISHER '94 COMMITTEE 2 CHATHAM CENTER 12TH FLOOR PITTSBURGH PA 15219	CONTRIBUTION-STATE. PA Disbursement for: Primary General Other (specify)	4/22/94	$200.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
CITIZENS FOR RON HUXTON P O BOX 11781 HARRISBURG PA 17108	STATE CONTRIBUTION PA Disbursement for: Primary General Other (specify)	4/25/94	400.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
FRIENDS OF SAM KATZ 1617 JFK BOULEVARD SUITE 1245 PHILADELPHIA PA 19103	STATE CONTRIBUTION-PA Disbursement for: Primary General Other (specify)	5/3/94	1,000.00
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
FRIENDS OF MARK SINGEL COMMITTEE P O BOX 11624 HARRISBURG PA 17108	STATE CONTRIBUTION-PA Disbursement for: Primary General Other (specify)	5/1/94 6/1/94	1,000.00 1,000.00
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
THE HONORABLE F. JOSEPH LOEPER P O BOX 135 DREXEL HILL PA 19026	STATE CONTRIBUTION-PA Disbursement for: Primary General Other (specify)	5/3/94 5/9/94	250.00 500.00
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
TOM RIDGE FOR GOVERNOR COMMITTEE P O BOX 11667 HARRISBURG PA 17108	STATE CONTRIBUTION-PA Disbursement for: Primary General Other (specify)	6/8/94	500.00
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
PENNSYLVANIA DEMOCRATIC STATE COMMITTEE 510 NORTH THIRD STREET HARRISBURG PA 17101	STATE CONTRIBUTION-PA Disbursement for: Primary General Other (specify)	6/14/94	250.00
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
SENATE REPUBLICAN CAMPAIGN COMMITTEE P O BOX 792 HARRISBURG PA 17108	STATE CONTRIBUTION-PA Disbursement for: Primary General Other (specify)	6/17/94	250.00
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
FRIENDS OF SENATOR BRIGHTBILL P O BOX 822 LEBANON PA 17042	STATE CONTRIBUTION-PA Disbursement for: Primary General Other (specify)	6/14/94	250.00

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

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

9 4 0 5 9 1 2 0 4 3 3

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2

FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
SENATOR CHAKAH FATTAH 2043 WALNUT STREET PHILADELPHIA PA 19103	STATE CONTRIBUTION-PA	6/17/94	$750.00
SENATE REPUBLICAN CAMPAIGN COMMITTEE P O BOX 792 HARRISBURG PA 17108	STATE CONTRIBUTION-PA	6/17/94	300.00
COMMITTEE TO RE-ELECT NICK COLAFELLA 111 SHADYSIDE DRIVE ALIQUIPPA PA 15001	STATE CONTRIBUTION-PA	6/17/94	100.00
FRIENDS OF BOB MELLON 524 MAIN STREET PECKVILLE PA 18452	STATE CONTRIBUTION-PA	6/30/94	400.00
FLEAGLE FOR ELECTION COMMITTEE BOX 278 ROUZERVILLE PA 17250	STATE CONTRIBUTION-PA	6/30/94	250.00
FATTAH FOR CONGRESS 2043 WALNUT STREET PHILADELPHIA PA 19103	STATE CONTRIBUTION PA	5/3/94	250.00
UNITEMIZED CONTRIBUTIONS	STATE CONTRIBUTIONS-PA	VARIOUS	2,725.00

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

TOTAL This Period (last page this line number only) 10,375.00

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 7/15/94
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

J.A.Q.
PREPARER

7/19/94
DATE PREPARED

FEC FORM 70-2 (12/92)

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