

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 Healthy Government Committee-The Political Action Committee of BCBSAZ

ADDRESS (number and street) P.O. Box 13466 Check if different than previously reported. (ACC) Phoenix AZ 85002

2. FEC IDENTIFICATION NUMBER C00215202 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special Election on 11 04 2008 in the State of AZ

5. Covering Period 10 16 2008 through 11 24 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Ms Kathryn Baker Signature of Treasurer Electronically Filed by Ms Kathryn Baker Date 12 01 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 FE6AN026 FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Healthy Government Committee-The Political Action Committee of BCBSAZ

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 1 | 6 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

 To:

| | |
|---|---|
| M | M |
| 1 | 1 |

| | |
|---|---|
| D | D |
| 2 | 4 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|----------|
| 6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 8 | | 15296.95 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 8 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 9416.95 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 2511.00 | 20701.00 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 11927.95 | 35997.95 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 0.00 | 24070.00 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 11927.95 | 11927.95 | | | | | | | | |
| 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

Healthy Government Committee-The Political Action Committee of BCBSAZ

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 1 | 6 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

 To:

| | |
|---|---|
| M | M |
| 1 | 1 |

| | |
|---|---|
| D | D |
| 2 | 4 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | 2010.00 | 6905.00 |
| (i) Itemized (use Schedule A) | | |
| (ii) Unitemized | 501.00 | 12596.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 2511.00 | 19501.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 2511.00 | 19501.00 |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 1200.00 |
| 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)) | 2511.00 | 20701.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 2511.00 | 20701.00 |

DETAILED SUMMARY PAGE

of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share..... | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures..... | 0.00 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... | 0.00 | 0.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 24070.00 |
| 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)).. | 0.00 | 24070.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 0.00 | 24070.00 |

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 | 2511.00 | 19501.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 2511.00 | 19501.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 0.00 | 0.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 0.00 |

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

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

FOR LINE NUMBER: PAGE 6 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A. Full Name (Last, First, Middle Initial)
Mrs. Karen Abraham

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
Phoenix AZ 85021

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

Name of Employer Blue Cross & Blue Shield of AZ
Occupation V.P.-Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

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

Transaction ID: SA11AI.9139

Amount of Each Receipt this Period
45.00

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

Mailing Address 2444 W. Las Palmaritas

City State Zip Code
Phoenix AZ 85002

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

Name of Employer Blue Cross and Blue Shield of Arizona
Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

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

Transaction ID: SA11AI.9140

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
Mr. daniel aspery, md

Mailing Address 2444 W. Las Palmaritas

City State Zip Code
Phoenix AZ 85021

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

Name of Employer bcbsaz
Occupation vice president

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

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

Transaction ID: SA11AI.9141

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **105.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|---|--|-------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one) <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | PAGE 7 / 21 |
|---|--|-------------|

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NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)
Mr. Tony Astorga

Mailing Address P.O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer
Blue Cross & Blue Shield of AZ
Occupation
Sr. V.P. & CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
11 / 20 / 2008

Transaction ID: SA11AI.9142

Amount of Each Receipt this Period
75.00

B.

Full Name (Last, First, Middle Initial)
Ms Kathryn Baker

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
Phoenix AZ 85021

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

Name of Employer
Blue Cross & Blue Shield of Arizona
Occupation
VP & Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
11 / 20 / 2008

Transaction ID: SA11AI.9143

Amount of Each Receipt this Period
75.00

C.

Full Name (Last, First, Middle Initial)
Mr. Richard Boals

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
Phoenix AZ 85021

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

Name of Employer
Blue Cross & Blue Shield of Arizona
Occupation
President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
11 / 20 / 2008

Transaction ID: SA11AI.9149

Amount of Each Receipt this Period
75.00

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

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

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

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

FOR LINE NUMBER: PAGE 8 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A. Full Name (Last, First, Middle Initial)
Ms Susan Broadman

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
Phoenix AZ 85021

FEC ID number of contributing federal political committee. C

Name of Employer: Blue Cross & Blue Shield of Arizona Occupation: Staffing Specialist/EEO Coordinator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: MM / DD / YYYY
11 / 20 / 2008

Transaction ID: SA11AI.9151

Amount of Each Receipt this Period
45.00

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

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
Phoenix AZ 85021

FEC ID number of contributing federal political committee. C

Name of Employer: Blue Cross & Blue Shield of Arizona Occupation: V.P.-Underwriting & Actuarial Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt: MM / DD / YYYY
11 / 20 / 2008

Transaction ID: SA11AI.9154

Amount of Each Receipt this Period
60.00

C. Full Name (Last, First, Middle Initial)
Sherri Burruss

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

FEC ID number of contributing federal political committee. C

Name of Employer: BCBSAZ Occupation: Actuarial

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: MM / DD / YYYY
11 / 20 / 2008

Transaction ID: SA11AI.9155

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) 180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 21
(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)
Healthy Government Committee-The Political Action Committee of BCBSAZ

| | |
|--|---|
| <p>A. Full Name (Last, First, Middle Initial) Mrs. Helen Chandler</p> <p>Mailing Address 2444 W. Las Palmaritas Drive</p> <p>City State Zip Code Phoenix AZ 85021</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Blue Cross & Blue Shield of Arizona</p> <p>Occupation Sr. V.P.-Claims & Federal Programs</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 550.00</p> | <p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 8</p> <p>Transaction ID: SA11AI.9157</p> <p>Amount of Each Receipt this Period 75.00</p> |
|--|---|

| | |
|--|---|
| <p>B. Full Name (Last, First, Middle Initial) Lisa Cherney</p> <p>Mailing Address P. O. Box 13466</p> <p>City State Zip Code Phoenix AZ 85002</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSAZ</p> <p>Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.00</p> | <p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 8</p> <p>Transaction ID: SA11AI.9158</p> <p>Amount of Each Receipt this Period 30.00</p> |
|--|---|

| | |
|---|---|
| <p>C. Full Name (Last, First, Middle Initial) Kathy Clubine</p> <p>Mailing Address P. O. Box 13466</p> <p>City State Zip Code Phoenix AZ 85002</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSAZ</p> <p>Occupation mgr</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 330.00</p> | <p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 8</p> <p>Transaction ID: SA11AI.9159</p> <p>Amount of Each Receipt this Period 45.00</p> |
|---|---|

| | |
|--|--|
| SUBTOTAL of Receipts This Page (optional) | 150.00 |
| 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 10 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A. Full Name (Last, First, Middle Initial)
linda douglas
Mailing Address P. O. Box 13466
City Phoenix State AZ Zip Code 85002
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSAZ Occupation staff
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt 11 / 20 / 2008
Transaction ID: SA11AI.9163
Amount of Each Receipt this Period 30.00

B. Full Name (Last, First, Middle Initial)
Gerry Farmer
Mailing Address P. O. Box 13466
City Phoenix State AZ Zip Code 85002
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSAZ Occupation director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt 11 / 20 / 2008
Transaction ID: SA11AI.9167
Amount of Each Receipt this Period 30.00

C. Full Name (Last, First, Middle Initial)
Terri Gades
Mailing Address P. O. Box 13466
City Phoenix State AZ Zip Code 85002
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSAZ Occupation director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt 11 / 20 / 2008
Transaction ID: SA11AI.9169
Amount of Each Receipt this Period 30.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 21
(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)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)
Barbara Guerriero

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer BCBSAZ Occupation vice president

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: SA11AI.9172

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
Mr. Richard Hannon

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
Phoenix AZ 85021

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

Name of Employer Blue Cross & Blue Shield of Arizona Occupation Sr. V.P.-External Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

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

Transaction ID: SA11AI.9174

Amount of Each Receipt this Period
75.00

C.

Full Name (Last, First, Middle Initial)
Mr. Christopher Hogan

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
Phoenix AZ 85002

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

Name of Employer Blue Cross and Blue Shield of Arizona Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: SA11AI.9176

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► 135.00

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 / 21

(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)

Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)

Cathy Huskey

Mailing Address 2444 West Las Palmaritas Drive

City State Zip Code
Phoenix AZ 85021

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

Name of Employer Occupation
BCBSAZ director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

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

Transaction ID: SA11AI.9177

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)

Bonnie Irwin

Mailing Address 2444 W. Las Palmaritas

City State Zip Code
Phoenix AZ 85021

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

Name of Employer Occupation
BCBSAZ vice president

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

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

Transaction ID: SA11AI.9178

Amount of Each Receipt this Period
45.00

C.

Full Name (Last, First, Middle Initial)

Sheri Jackson

Mailing Address 2444 W Las Palmaritas

City State Zip Code
Phoenix AZ 85021

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

Name of Employer Occupation
BCBSAZ vice president

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

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

Transaction ID: SA11AI.9180

Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional) ▶

120.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 21

(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)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)
Ms Mary Sue Jacobs

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
Phoenix AZ 85021

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Blue Cross & Blue Shield of Arizona Sr. Tech. Support Analyst

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

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

Transaction ID: SA11AI.9179

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
Lori Lambrecht

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
BCBSAZ

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

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

Transaction ID: SA11AI.9183

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Marty Laurel

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
Phoenix AZ 85021

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
BCBSAZ vice president

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 330.00

Date of Receipt

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

Transaction ID: SA11AI.9184

Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional) 105.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 14 / 21

(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)

Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)

Robyn Mauser

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer Occupation
BCBSAZ

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

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

Transaction ID: SA11AI.9187

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)

Vicky McDonald

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer Occupation
BCBSAZ vice president

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

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

Transaction ID: SA11AI.9188

Amount of Each Receipt this Period
45.00

C.

Full Name (Last, First, Middle Initial)

Susan Meitz

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer Occupation
BCBSAZ manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

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

Transaction ID: SA11AI.9189

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ▶

105.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A. Full Name (Last, First, Middle Initial)
elizabeth messina

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer BCBSAZ Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 770.00

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

Transaction ID: SA11AI.9192

Amount of Each Receipt this Period
105.00

B. Full Name (Last, First, Middle Initial)
laura meyer

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer BCBSAZ Occupation Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: SA11AI.9193

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
Mrs. Jody Miller

Mailing Address 2444 W. Las Palmaritas

City State Zip Code
Phoenix AZ 85002

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

Name of Employer Blue Cross and Blue Shield of Arizona Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

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

Transaction ID: SA11AI.9194

Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional) ► 180.00

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

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

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

FOR LINE NUMBER: PAGE 16 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A. Full Name (Last, First, Middle Initial)
Cindy Montgomery
Mailing Address P. O. box 13466
City Phoenix State AZ Zip Code 85002
FEC ID number of contributing federal political committee. **C**
Name of Employer bcbsaz Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt 11 / 20 / 2008
Transaction ID: SA11AI.9195
Amount of Each Receipt this Period 30.00

B. Full Name (Last, First, Middle Initial)
Mrs. Susan Nash
Mailing Address 2444 W. Las Palmaritas Drive
City Phoenix State AZ Zip Code 85021
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross & Blue Shield of Arizona Occupation V.P.-Federal Programs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt 11 / 20 / 2008
Transaction ID: SA11AI.9198
Amount of Each Receipt this Period 30.00

C. Full Name (Last, First, Middle Initial)
Mrs. Susan Navran
Mailing Address 2444 W. Las Palmaritas
City Phoenix State AZ Zip Code 85002
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross and Blue Shield of Arizona Occupation Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00
Date of Receipt 11 / 20 / 2008
Transaction ID: SA11AI.9199
Amount of Each Receipt this Period 45.00

SUBTOTAL of Receipts This Page (optional) ► 105.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 21
(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)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)
robert nenad

Mailing Address P. O. BOX 13466

City State Zip Code
PHOENIX AZ 85002

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

Name of Employer BCBSAZ Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
11 / 20 / 2008

Transaction ID: SA11AI.9200

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
Marty O'Reilly

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer BCBSAZ Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
11 / 20 / 2008

Transaction ID: SA11AI.9203

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Nancy Olivo

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer BCBSAZ Occupation
manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
11 / 20 / 2008

Transaction ID: SA11AI.9204

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **90.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 21
(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)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)
Linda Olvey

Mailing Address P. O. box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer bcbsaz Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

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

Transaction ID: SA11AI.9205

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
Pam Ray

Mailing Address 2444 W. Las Palmaritas

City State Zip Code
Phoenix AZ 85021

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

Name of Employer BCBSAZ Occupation vice president

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

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

Transaction ID: SA11AI.9210

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Adam Rice

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer BCBSAZ Occupation director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

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

Transaction ID: SA11AI.9211

Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional) ► **105.00**

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

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

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

FOR LINE NUMBER: PAGE 19 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A. Full Name (Last, First, Middle Initial)
Deanna Salazar

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer BCBSAZ Occupation vice president

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

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

Transaction ID: SA11AI.9213

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
debbie scoles

Mailing Address p. o. box 13466

City State Zip Code
phoenix AZ 85002

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

Name of Employer bcbsaz Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: SA11AI.9214

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
Mary Semma

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer BCBSAZ Occupation VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

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

Transaction ID: SA11AI.9215

Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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 20 / 21 |
| | <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)
Healthy Government Committee-The Political Action Committee of BCBSAZ

| | | | |
|---|--|-------------------------------------|---|
| A. | Full Name (Last, First, Middle Initial) Scott Sowell | | Date of Receipt |
| | Mailing Address P O Box 13466 | | <input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2008"/> |
| | City | State | Zip Code |
| | Phoenix | AZ | 85002 |
| | FEC ID number of contributing federal political committee. | | Transaction ID: SA11AI.9221 |
| | | Amount of Each Receipt this Period | |
| | | <input type="text" value="30.00"/> | |
| Name of Employer BCBSAZ | | Occupation Director | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | |
| | | <input type="text" value="220.00"/> | |

| | | | |
|---|---|-------------------------------------|---|
| B. | Full Name (Last, First, Middle Initial) Michelle Spaulding | | Date of Receipt |
| | Mailing Address P. O. Box 13466 | | <input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2008"/> |
| | City | State | Zip Code |
| | Phoenix | AZ | 85002 |
| | FEC ID number of contributing federal political committee. | | Transaction ID: SA11AI.9220 |
| | | Amount of Each Receipt this Period | |
| | | <input type="text" value="30.00"/> | |
| Name of Employer bcbsaz | | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | |
| | | <input type="text" value="220.00"/> | |

| | | | |
|---|--|-------------------------------------|---|
| C. | Full Name (Last, First, Middle Initial) Su Tucker | | Date of Receipt |
| | Mailing Address P. O. Box 13466 | | <input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2008"/> |
| | City | State | Zip Code |
| | Phoenix | AZ | 85002 |
| | FEC ID number of contributing federal political committee. | | Transaction ID: SA11AI.9223 |
| | | Amount of Each Receipt this Period | |
| | | <input type="text" value="45.00"/> | |
| Name of Employer BCBSAZ | | Occupation Director | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | |
| | | <input type="text" value="330.00"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="105.00"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 21 / 21 |
| | (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)
Healthy Government Committee-The Political Action Committee of BCBSAZ

| | | | |
|---|--|---|---|
| A. | Full Name (Last, First, Middle Initial) Mrs. Carol Von Fange | | Date of Receipt |
| | Mailing Address 2444 W. Las Palmaritas | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y Y 1 1 / 2 0 / 2 0 0 8 |
| | City | State | Zip Code |
| | Phoenix | AZ | 85002 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.9224 |
| Name of Employer Blue Cross and Blue Shield of Arizona | | Occupation Manager | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ <input type="text"/> 220.00 | <input type="text"/> 30.00 |

| | | | |
|---|--|---|---|
| B. | Full Name (Last, First, Middle Initial) Mike Woodard | | Date of Receipt |
| | Mailing Address 2444 W. Las Palmaritas | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y Y 1 1 / 2 0 / 2 0 0 8 |
| | City | State | Zip Code |
| | Phoenix | AZ | 85002 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.9227 |
| Name of Employer Blue Cross Blue Shield of AZ | | Occupation Director | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ <input type="text"/> 220.00 | <input type="text"/> 30.00 |

| | |
|--|------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text"/> 60.00 |
| TOTAL This Period (last page this line number only) | <input type="text"/> 2010.00 |