

**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 Cross and Blue Shield of North Carolina Employee Political Action Committee

ADDRESS (number and street)

P.O. Box 2291

☐Check if different  
than previously  
reported. (ACC)

Durham

NC

27702

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00312223

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

11

07

2006

in the  
State of

NC

(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

10

01

2006

through

10

18

2006

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

Kenneth Wright

Signature of Treasurer

Electronically Filed by Kenneth Wright

Date

10

23

2006

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**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
1	0	1	8	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		53461.31
(b) Cash on Hand at Beginning of Reporting Period .....	15082.22	
(c) Total Receipts (from Line 19) .....	3527.99	78698.90
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	18610.21	132160.21
7. Total Disbursements (from Line 31) .....	7000.00	120550.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	11610.21	11610.21
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> 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**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
1	0	1	8	2	0	0	6

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	3263.01	59930.87
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	264.98	18768.03
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	3527.99	78698.90
(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) .....	3527.99	78698.90
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	3527.99	78698.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	3527.99	78698.90

**DETAILED SUMMARY PAGE**

of Disbursements

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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	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	23500.00
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.....	7000.00	97050.00
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))..	7000.00	120550.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	7000.00	120550.00

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 5

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) .....	3527.99	78698.90
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3527.99	78698.90
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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 32

(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 Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Frances Adams Mailing Address 1 Chatham Lane City State Zip Code Chapel Hill NC 27514 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58015 Amount of Each Receipt this Period 10.00
<b>B.</b> Full Name (Last, First, Middle Initial) Bradley Adcock Mailing Address 106 Lindenthal Court City State Zip Code Cary NC 27513 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.08		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58016 Amount of Each Receipt this Period 96.38
<b>C.</b> Full Name (Last, First, Middle Initial) William Alberti Mailing Address 5347 Yardley Terrace City State Zip Code Durham NC 27707 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Assoc. General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 493.28		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58017 Amount of Each Receipt this Period 23.68
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		130.06
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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

FOR LINE NUMBER: PAGE 7 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) John Armentrout Mailing Address 108 Woodleaf Dr City Chapel Hill State NC Zip Code 27516 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Project Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58019 Amount of Each Receipt this Period 10.00
<b>B.</b> Full Name (Last, First, Middle Initial) Daniel Atherton Mailing Address 8800 Hatton Court City Charlotte State NC Zip Code 28277 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Regional Sales Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58020 Amount of Each Receipt this Period 25.00
<b>C.</b> Full Name (Last, First, Middle Initial) Jacky Baker Mailing Address P O Box 3648 City Hickory State NC Zip Code 28603 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Sales Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58022 Amount of Each Receipt this Period 10.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			45.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 32

(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 Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Ronda Barnes Mailing Address 1575 Airport Road #1 City Chapel Hill State NC Zip Code 27517 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Project Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 308.93		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58023 Amount of Each Receipt this Period 14.83
<b>B.</b> Full Name (Last, First, Middle Initial) Tracy Bennett Mailing Address 208 Linville Springs Rd. City Kernersville State NC Zip Code 27248 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58025 Amount of Each Receipt this Period 10.00
<b>C.</b> Full Name (Last, First, Middle Initial) Gary Bolt Mailing Address 4801 Highgate Drive City Durham State NC Zip Code 27713 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1056.56		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58027 Amount of Each Receipt this Period 50.71

**SUBTOTAL** of Receipts This Page (optional) .....**75.54****TOTAL** This Period (last page this line number only) .....



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Milo Brunick		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 4020 Grayson Ridge Court		<b>Transaction ID:</b> SA11A1.58029
City Raleigh	State NC	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Michele Cash		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 8094 Grassy Creek Road		<b>Transaction ID:</b> SA11A1.58035
City Oxford	State NC	Amount of Each Receipt this Period 17.72
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer BCBSNC	Occupation Senior Compensation Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 367.67	

<b>C.</b> Full Name (Last, First, Middle Initial) Steven Cherrier		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 1207 Holly Creek Lane		<b>Transaction ID:</b> SA11A1.58037
City Chapel Hill	State NC	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

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

62.72

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

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 10 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Mark Coyne Mailing Address 121 Graylyn Drive City Chapel Hill State NC Zip Code 27516 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58040 Amount of Each Receipt this Period 20.00
<b>B.</b> Full Name (Last, First, Middle Initial) Lynn Duffy Mailing Address 111 Suffolk Place City Chapel Hill State NC Zip Code 27516 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 840.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58050 Amount of Each Receipt this Period 40.00
<b>C.</b> Full Name (Last, First, Middle Initial) James Emmons Mailing Address 105 Vyne Court City Cary State NC Zip Code 27519 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1373.30			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58053 Amount of Each Receipt this Period 66.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			126.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 32

(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 Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Tracy Euliss Mailing Address 5315 Middleton Rd City State Zip Code Durham NC 27713 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Analyst Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 261.24		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58054 Amount of Each Receipt this Period 12.54
<b>B.</b> Full Name (Last, First, Middle Initial) John Friesen Mailing Address 50009 Brogden City State Zip Code Chapel Hill NC 27514 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2057.05		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58055 Amount of Each Receipt this Period 98.75
<b>C.</b> Full Name (Last, First, Middle Initial) Celia Fuller Mailing Address 6114 Westglen Dr City State Zip Code Raleigh NC 27612 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Resource/Technical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 783.10		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58056 Amount of Each Receipt this Period 37.55
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		148.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

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

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

FOR LINE NUMBER: PAGE 12 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Kathi Gaines Mailing Address 603 Kingswood Drive City State Zip Code Cary NC 27513 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 846.69			Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58057 Amount of Each Receipt this Period 40.69
<b>B.</b> Full Name (Last, First, Middle Initial) Lynne Garrison Mailing Address 806 Green Passage Lane City State Zip Code Apex NC 27502 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1353.11			Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58059 Amount of Each Receipt this Period 64.81
<b>C.</b> Full Name (Last, First, Middle Initial) Daniel Glaser Mailing Address 3613 Hathaway Road City State Zip Code Durham NC 27707 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3885.00			Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58061 Amount of Each Receipt this Period 185.00

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

290.50

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

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

Laura Gorry

Mailing Address 2566 Ironwood Drive

City State Zip Code  
Hickory NC 28602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
Regional Service Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.88

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58063

Amount of Each Receipt this Period

29.03

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

Robert Greczyn

Mailing Address 113 Richelieu Dr.

City State Zip Code  
Cary NC 27511

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4038.30

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58064

Amount of Each Receipt this Period

192.30

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

Mr. Darrell Grissom, II

Mailing Address 1105 New Hampshire Drive

City State Zip Code  
Jamestown NC 27282

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
Consumer Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.76

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58065

Amount of Each Receipt this Period

13.56

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

234.89

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

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

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

FOR LINE NUMBER: PAGE 14 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

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

Rebecca Groce

Mailing Address 2854 Saxapahaw Bethlehem Church Rd

City State Zip Code  
 Graham NC 27253

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.38

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58066

Amount of Each Receipt this Period

12.54

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

Danny Gunselman

Mailing Address 3018 Annandale Road

City State Zip Code  
 Durham NC 27705

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

622.57

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58067

Amount of Each Receipt this Period

29.88

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

Dr. Robert Harris

Mailing Address 9817 Woodsong Ct.

City State Zip Code  
 Raleigh NC 27613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
CMO & SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2422.98

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58069

Amount of Each Receipt this Period

115.38

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

157.80

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

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

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

FOR LINE NUMBER: PAGE 15 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Charles Harvey Mailing Address 426 Holly Springs Dr City State Zip Code Timberlake NC 27583 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Inst. Designer & Developer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 259.41		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58070 Amount of Each Receipt this Period 12.41
<b>B.</b> Full Name (Last, First, Middle Initial) Patricia Hatfield Mailing Address 102 Oak Spring Court City State Zip Code Carrboro NC 27510 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Assoc. General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58072 Amount of Each Receipt this Period 10.00
<b>C.</b> Full Name (Last, First, Middle Initial) Sarah Hearn Mailing Address 1181 Bowers Store Road City State Zip Code Siler City NC 27344 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 384.33		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58074 Amount of Each Receipt this Period 18.43
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		40.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

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

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

FOR LINE NUMBER: PAGE 16 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Ms Susan Helm-Murtagh Mailing Address 117 Oldham Place City State Zip Code Chapel Hill NC 27516 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Resource Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 798.67			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58075 Amount of Each Receipt this Period 38.47
<b>B.</b> Full Name (Last, First, Middle Initial) Steven Hicks Mailing Address 7512 Tylerton Dr City State Zip Code Raleigh NC 27613 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58078 Amount of Each Receipt this Period 10.00
<b>C.</b> Full Name (Last, First, Middle Initial) Deborah Jenkins Mailing Address 208 Trailview Drive City State Zip Code Cary NC 27513 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Resource/Technical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 860.14			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58084 Amount of Each Receipt this Period 41.29

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

89.76

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



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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

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

Vernelle Jones

Mailing Address 404 Lindsay St

City State Zip Code  
 Chapel Hill NC 27516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.83

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58087

Amount of Each Receipt this Period

19.23

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

Mr. James Kenley, Sr.

Mailing Address 4670 Elmhurst Drive NE

City State Zip Code  
 Hickory NC 28601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1602.35

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58090

Amount of Each Receipt this Period

77.40

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

E George Lassiter

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BCBSNC

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1309.61

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58093

Amount of Each Receipt this Period

69.23

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

165.86

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

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

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

FOR LINE NUMBER: PAGE 18 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Dayna Lucas Mailing Address 121 Breckenridge Pl City State Zip Code Chapel Hill NC 27514 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Medical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58094 Amount of Each Receipt this Period 25.00
<b>B.</b> Full Name (Last, First, Middle Initial) Debra MacClennan Mailing Address 400 Lakeshore Lane City State Zip Code Chapel Hill NC 27514 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1615.74		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58097 Amount of Each Receipt this Period 76.94
<b>C.</b> Full Name (Last, First, Middle Initial) Laurie Mace Mailing Address 105 Dutchess Lane City State Zip Code Chapel Hill NC 27514 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Project Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 355.60		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58098 Amount of Each Receipt this Period 17.05
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		118.99
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

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

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

FOR LINE NUMBER: PAGE 19 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Joe McDowell

Mailing Address 165 Farmington Road

City State Zip Code  
Grimesland NC 27837

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
BCBSNC

Occupation  
Regional Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58100

Amount of Each Receipt this Period

16.00

Full Name (Last, First, Middle Initial)

**B.** Lynn McNeal

Mailing Address 185 Swansea Lane

City State Zip Code  
Chapel Hill NC 27516

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
BCBSNC

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1705.93

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58103

Amount of Each Receipt this Period

81.98

Full Name (Last, First, Middle Initial)

**C.** Jonathan Meyer

Mailing Address 9005 Leverton Lane

City State Zip Code  
Raleigh NC 27615

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
BCBSNC

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58105

Amount of Each Receipt this Period

10.00

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

107.98

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

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

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 105 Songbird Lane		
City	State	Zip Code
Chapel Hill	NC	27514
FEC ID number of contributing federal political committee.		Transaction ID: SA11A1.58106
Name of Employer BCBSNC		Amount of Each Receipt this Period 17.68
Occupation Sr. OD Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 356.48	

<b>B.</b> Full Name (Last, First, Middle Initial) Kathryn Millican		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 1632 Lorraine Road		
City	State	Zip Code
Raleigh	NC	27607
FEC ID number of contributing federal political committee.		Transaction ID: SA11A1.58107
Name of Employer BCBSNC		Amount of Each Receipt this Period 17.61
Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.66	

<b>C.</b> Full Name (Last, First, Middle Initial) Ms Linda Norwood		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 1131 Fleming Road		
City	State	Zip Code
Creedmoor	NC	27522
FEC ID number of contributing federal political committee.		Transaction ID: SA11A1.58111
Name of Employer BCBSNC		Amount of Each Receipt this Period 11.36
Occupation Supervisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.16	

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

46.65

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

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

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

FOR LINE NUMBER: PAGE 21 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

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

Maureen OConnor

Mailing Address 104 Beeston Ct.

City State Zip Code  
 Morrisville NC 27560

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1785.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58113

Amount of Each Receipt this Period

85.00

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

James Owens

Mailing Address 12 Treadway Court

City State Zip Code  
 Hillsborough NC 27278

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1573.80

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58115

Amount of Each Receipt this Period

78.08

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

Fara Palumbo

Mailing Address 1000 Gloucester Ct

City State Zip Code  
 Chapel Hill NC 27516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

983.41

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58117

Amount of Each Receipt this Period

47.31

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

210.39

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 32

(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 Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Marianella Perdomo Mailing Address 1835 Adare Drive City Clemmons State NC Zip Code 27012 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58120 Amount of Each Receipt this Period 10.00
<b>B.</b> Full Name (Last, First, Middle Initial) Gerald Petkau Mailing Address 402 Troycott Place City Cary State NC Zip Code 27519 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1119.44			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58122 Amount of Each Receipt this Period 53.74
<b>C.</b> Full Name (Last, First, Middle Initial) Jocelyn Pickett Mailing Address 203 Chancellor's Ridge City Durham State NC Zip Code 27713 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 599.72			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58125 Amount of Each Receipt this Period 28.77

**SUBTOTAL** of Receipts This Page (optional) .....**92.51****TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER: PAGE 23 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58131
Mailing Address 236 Coachlight Trail		
City Burlington	State NC	Zip Code 27215
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 27.33
Name of Employer BCBSNC	Occupation Project Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 567.43	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Harry Reynolds, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58132
Mailing Address 1201 Summerville Lane		
City Durham	State NC	Zip Code 27712
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1560.60	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Daniel Risku		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58134
Mailing Address 105 San Miguel Place		
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 91.32
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1910.97	

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

193.65

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

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

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

FOR LINE NUMBER: PAGE 24 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

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

Mr. Michael Roach

Mailing Address 201 Woodleaf Dr

City State Zip Code  
 Chapel Hill NC 27516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58135

Amount of Each Receipt this Period

50.00

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

Mr. John Roos

Mailing Address 119 Draymore Way

City State Zip Code  
 Morrisville NC 27560

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2863.38

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58136

Amount of Each Receipt this Period

140.38

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

Mike Serozi

Mailing Address 128 Lochwood Dr. West

City State Zip Code  
 Cary NC 27511

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
Resource/Technical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

873.90

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58139

Amount of Each Receipt this Period

42.00

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

232.38

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



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

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

FOR LINE NUMBER: PAGE 25 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

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

Brenda Smith

Mailing Address 100 Sam Sneed Drive

City State Zip Code  
 Mebane NC 27302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.26

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58142

Amount of Each Receipt this Period

4.12

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

William Smith

Mailing Address 303 Lynden Valley Court

City State Zip Code  
 Cary NC 27519

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.90

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58143

Amount of Each Receipt this Period

20.00

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

John Sternbergh

Mailing Address 3726 St. Mark's Road

City State Zip Code  
 Durham \* NC 27707

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BCBSNC

Occupation  
SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2625.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.58145

Amount of Each Receipt this Period

125.00

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

149.12

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

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

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

FOR LINE NUMBER: PAGE 26 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Mark Stinneford Mailing Address 104 Aborfield Court City Cary State NC Zip Code 27513 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58147 Amount of Each Receipt this Period 10.00
<b>B.</b> Full Name (Last, First, Middle Initial) Richard Supinski Mailing Address 2610 Lochmore Drive City Raleigh State NC Zip Code 27608 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58152 Amount of Each Receipt this Period 20.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Carol Sutton Mailing Address 22101 Spring Meadow Dr. City Chapel Hill State NC Zip Code 27514 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1023.48			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58153 Amount of Each Receipt this Period 49.08

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

79.08

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

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

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

FOR LINE NUMBER: PAGE 27 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Vavrina Mailing Address 315 Northcreek Dr. City State Zip Code Durham NC 27707 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2100.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58158 Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) Jason Weinstein Mailing Address 1604 Foreman Street City State Zip Code Hillsborough NC 27278 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Resource Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 459.06			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58163 Amount of Each Receipt this Period 22.06
<b>C.</b> Full Name (Last, First, Middle Initial) Jeffrey Weinstock Mailing Address 102 Tremont Circle City State Zip Code Chapel Hill NC 27516 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 601.95			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58164 Amount of Each Receipt this Period 28.80

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

150.86

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

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

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

FOR LINE NUMBER: PAGE 28 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Dionne Wells Mailing Address 9228 Cornwell Dr City Wake Forest State NC Zip Code 27587 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58165 Amount of Each Receipt this Period 10.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. James Wilson Mailing Address 227 Midenhall Way City Cary State NC Zip Code 27513 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3638.42			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58168 Amount of Each Receipt this Period 176.92
<b>C.</b> Full Name (Last, First, Middle Initial) Randy Winslow Mailing Address 1609 Valley Creek Drive City Hillsborough State NC Zip Code 27278 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BCBSNC Occupation Business Analyst Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.14			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.58169 Amount of Each Receipt this Period 11.36

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

198.28

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 32

(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 Cross and Blue Shield of North Carolina Employee Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin			Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6	
Mailing Address 100 Palmyra Place			<b>Transaction ID:</b> SA11A1.58170	
City State Zip Code Chapel Hill NC 27514			Amount of Each Receipt this Period 80.31	
FEC ID number of contributing federal political committee. C				
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1672.91		
<b>B.</b> Full Name (Last, First, Middle Initial) Kenneth Wright			Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6	
Mailing Address 618 S. Wingate Dr.			<b>Transaction ID:</b> SA11A1.58171	
City State Zip Code Wake Forest NC 27587			Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C				
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 730.00		

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

115.31

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

3263.01

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 32

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Austin Allran

Mailing Address

City

State

Zip Code

Purpose of Disbursement  
contribution

Candidate Name  
Austin Allran

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District:

**Transaction ID:** SB29.58179

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** Doug Berger

Mailing Address PO Box 1101

City

State

Zip Code

Purpose of Disbursement  
contribution

Candidate Name  
Doug Berger

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 7

**Transaction ID:** SB29.58180

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C.** Pete Brunstetter

Mailing Address

City

State

Zip Code

Purpose of Disbursement  
contribution

Candidate Name  
Pete Brunstetter

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC

District: 31

**Transaction ID:** SB29.58176

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

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

1500.00

**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)

PAGE 31 / 32

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Rep. Jerry Dockham

Mailing Address P.O. Box 265

City  
Denton

State  
NC

Zip Code  
27239

Purpose of Disbursement  
contribution

Candidate Name  
Rep. Jerry Dockham

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.58172

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Sen. David Hoyle

Mailing Address P.O. Box 2494

City  
Gastonia

State  
NC

Zip Code  
28053

Purpose of Disbursement  
contribution

Candidate Name  
Sen. David Hoyle

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.58173

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**C.** Rep. Larry Shaw

Mailing Address P.O. Box 1195

City  
Fayetteville

State  
NC

Zip Code  
28302

Purpose of Disbursement  
contribution

Candidate Name  
Rep. Larry Shaw

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.58175

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**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)

PAGE 32 / 32

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Full Name (Last, First, Middle Initial)

A. Fred Smith

Mailing Address 400 Riverwood Drive

City  
Clayton

State  
NC

Zip Code  
27520

Purpose of Disbursement  
contribution

Candidate Name  
Fred Smith

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.58174

Date of Disbursement

<sup>M</sup>  <sup>M</sup> /  <sup>D</sup>  <sup>D</sup> /  <sup>Y</sup>  <sup>Y</sup>  <sup>Y</sup>  <sup>Y</sup>

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

7000.00