

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
Blue Shield of California PAC (Shield PAC)

ADDRESS (number and street) 601 12th Street  
Check if different than previously reported. (ACC) Oakland CA 94607

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00340364 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End 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 (12S)  
Election on [MM] / [DD] / [YYYY] in the State of [ ]  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [01] / [01] / [2023] through [01] / [31] / [2023]

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Glidden, Emily, , ,  
Type or Print Name of Treasurer

Signature of Treasurer *Glidden, Emily, , ,* [Electronically Filed] Date [02] / [17] / [2023]

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Blue Shield of California PAC (Shield PAC)**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2023"/>		46205.21
(b) Cash on Hand at Beginning of Reporting Period.....	46205.21	
(c) Total Receipts (from Line 19) .....	14054.24	14054.24
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	60259.45	60259.45
7. Total Disbursements (from Line 31).....	32578.81	32578.81
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	27680.64	27680.64
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

Write or Type Committee Name

**Blue Shield of California PAC (Shield PAC)**

Report Covering the Period: From:  /  /  To:  /  /

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		
(i) Itemized (use Schedule A).....	1400.00	1400.00
(ii) Unitemized .....	12654.24	12654.24
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	14054.24	14054.24
(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) .....	14054.24	14054.24
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 Transfers (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)).....▶	14054.24	14054.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	14054.24	14054.24

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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 .....	78.81	78.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	78.81	78.81
22. Transfers to Affiliated/Other Party Committees.....	25000.00	25000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7500.00	7500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	32578.81	32578.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32578.81	32578.81

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	14054.24	14054.24
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	14054.24	14054.24
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	78.81	78.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	78.81	78.81

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

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

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

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

NAME OF COMMITTEE (In Full)  
**Blue Shield of California PAC (Shield PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Bergman, Patrice, , ,**

Mailing Address 601 12th Street

City Oakland	State CA	Zip Code 94607
-----------------	-------------	-------------------

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

Name of Employer (for Individual) BLUE SHIELD OF CA	Occupation (for Individual) VP
--	-----------------------------------

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 200.00

Date of Receipt  
 01 / 03 / 2023  
**Transaction ID : IA24765**

Amount of Each Receipt this Period  
 100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Chasin, Andrew, , ,**

Mailing Address 601 12th Street

City Oakland	State CA	Zip Code 94607
-----------------	-------------	-------------------

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

Name of Employer (for Individual) BLUE SHIELD OF CALIFORNIA	Occupation (for Individual) DIRECTOR
--	---

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 01 / 03 / 2023  
**Transaction ID : IA24794**

Amount of Each Receipt this Period  
 200.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Kiefer, Andrew, , ,**

Mailing Address 601 12th Street

City Oakland	State CA	Zip Code 94607
-----------------	-------------	-------------------

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

Name of Employer (for Individual) BLUE SHIELD OF CA	Occupation (for Individual) DIRECTOR
--	---

Receipt For:  
 Primary    General  
 Other (specify)

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 01 / 03 / 2023  
**Transaction ID : IA24897**

Amount of Each Receipt this Period  
 200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> 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 7 OF 11
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Blue Shield of California PAC (Shield PAC)**

**A. Markovich, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 601 12th Street  
 City Oakland State CA Zip Code 94607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUE SHIELD OF CALIFORNIA Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 01 / 03 / 2023  
**Transaction ID : IA24932**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**B. Bergman, Patrice, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 601 12th Street  
 City Oakland State CA Zip Code 94607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00

Date of Receipt 01 / 17 / 2023  
**Transaction ID : IA24434**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Chasin, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 601 12th Street  
 City Oakland State CA Zip Code 94607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUE SHIELD OF CALIFORNIA Occupation (for Individual) DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 01 / 17 / 2023  
**Transaction ID : IA24464**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> 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 OF 11  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Blue Shield of California PAC (Shield PAC)**

**A. Kiefer, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 601 12th Street  
 City Oakland State CA Zip Code 94607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 17 / 2023  
**Transaction ID : IA24567**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**B. Markovich, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 601 12th Street  
 City Oakland State CA Zip Code 94607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUE SHIELD OF CALIFORNIA Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 17 / 2023  
**Transaction ID : IA24602**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1400.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Blue Shield of California PAC (Shield PAC)**

**A. BLUE PAC**

Full Name (Last, First, Middle Initial)

Mailing Address 1310 G Street NW, 12th Floor

City Washington State DC Zip Code 20005

Purpose of Disbursement  008 Category/Type

Candidate Name **BLUE PAC**

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼

State: DC District:

Date of Disbursement: 01 / 17 / 2023

FEC Identification Number: **C** C00194746  
**Transaction ID : EB24402**  
 Amount of Each Disbursement this Period: 25000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement  Category/Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: / /

FEC Identification Number: **C**

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement  Category/Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: / /

FEC Identification Number: **C**

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	25000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	25000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Blue Shield of California PAC (Shield PAC)**

**A. Anna Eshoo for Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address 555 Capitol Mall, Suite 400

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  011 Category/Type

Candidate Name **Eshoo, Anna, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2024  Primary  General  Other (specify) ▼

State: CA District: 18

Date of Disbursement: 01 / 17 / 2023

FEC Identification Number: **C00258475**  
Transaction ID : **EB24404**  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. Michelle Steel for Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address 9070 Irvine Center Drive, Suite 15

City Irvine State CA Zip Code 92618

Purpose of Disbursement  011 Category/Type

Candidate Name **Steel, Michelle, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2024  Primary  General  Other (specify) ▼

State: CA District: 48

Date of Disbursement: 01 / 17 / 2023

FEC Identification Number: **C00704981**  
Transaction ID : **EB24403**  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. Swalwell for Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 2847

City Dublin State CA Zip Code 94568

Purpose of Disbursement  011 Category/Type

Candidate Name **Swalwell, Eric, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2024  Primary  General  Other (specify) ▼

State: CA District: 15

Date of Disbursement: 01 / 17 / 2023

FEC Identification Number: **C00502294**  
Transaction ID : **EB24405**  
Amount of Each Disbursement this Period: 2500.00

Memo Item

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

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

10000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Blue Shield of California PAC (Shield PAC)**

Full Name (Last, First, Middle Initial)

**A. Anna Eshoo for Congress**

Mailing Address 555 Capitol Mall, Suite 400

City Sacramento State CA Zip Code 95814

Purpose of Disbursement

001  
 011  
Category/  
Type

Candidate Name  
**Eshoo, Anna, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2024  Primary  General  Other (specify) ▼  
State: CA District: 18

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
01 / 19 / 2023

FEC Identification Number  
**C** C00258475  
**Transaction ID : EB24407**  
Amount of Each Disbursement this Period  
- 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y

FEC Identification Number  
**C**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y

FEC Identification Number  
**C**  
Amount of Each Disbursement this Period

Memo Item

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

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

- 2500.00  
7500.00