



BlueCross BlueShield  
of Kansas City

An Independent Licensee of the  
Blue Cross and Blue Shield Association

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FEC MAIL CENTER

One Pershing Square  
2501 Main  
P.O. Box 419169  
Kansas City, MO 64141-6169  
Telephone: (816) 395-2222  
[www.bcbskc.com](http://www.bcbskc.com)

September 30, 2010

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

RE: Blue Cross Blue Shield of Kansas City  
Federal Political Action Committee  
FEC No. C00301358  
FEC Form 3X –October 15, 2010 Quarterly Report

Dear Sir or Madam:

Please find enclosed for your file an original FEC Form 3X –October 15, 2010 Quarterly Report of Activity, submitted on behalf of Blue Cross and Blue Shield of Kansas City Federal Political Action Committee. This report covers the activity of our committee from July 1, 2010 through September 30, 2010.

Thank you for making this document a part of your files. If you have any questions, please do not hesitate to contact me at (816) 395-3498, fax 816-395-2379 or email [peggy.galvin@BlueKC.com](mailto:peggy.galvin@BlueKC.com).

Sincerely,

Peggy Galvin  
Government Affairs Coordinator

cc: Coni K. Fries, Federal PAC Treasurer

10030431478

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
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Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Blue Cross and Blue Shield of Kansas City Federal Political Action Committee

ADDRESS (number and street) ▼

One Pershing Square

2801 Main Street

Check if different than previously reported. (ACC)

Kansas City

MO

64108

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00301358

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)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on

MM / DD / YYYY

in the State of

XX

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

MM / DD / YYYY

in the State of

XX

5. Covering Period

MM / DD / YYYY through MM / DD / YYYY

07 / 01 / 2010 through 09 / 30 / 2010

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 Coni K. Fries

Signature of Treasurer

*Coni K Fries*

Date

MM / DD / YYYY

09 / 30 / 2010

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. 12/2004

10030431479

**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 Kansas City Federal Political Action Committee**

Report Covering the Period: From: MM / DD / YYYY 07 / 01 / 2010 To: MM / DD / YYYY 09 / 30 / 2010

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">YYYY</span> <span style="border: 1px solid black; padding: 2px;">2010</span>	<span style="border: 1px solid black; padding: 2px;">18965.01</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">17500.14</span>
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">480.25</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<span style="border: 1px solid black; padding: 2px;">17980.39</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">6055.09</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">11925.30</span>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0</span>
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0</span>



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

10030431480

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Blue Cross and Blue Shield of Kansas City Federal Political Action Committee**

Report Covering the Period: From: **07 / 01 / 2010** To: **09 / 30 / 2010**

**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).....	480.25	13228.90
(ii) Unitemized.....	0	0
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	480.25	13228.90
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	480.25	13228.90
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received.....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H5).....	0	0
(b) Levin Funds (from Schedule H5).....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	480.25	13228.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	480.25	13228.90

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**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	0
(ii) Non-Federal Share .....	0	0
(b) Other Federal Operating Expenditures .....	0	0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0	0
22. Transfers to Affiliated/Other Party Committees .....	0	8200.00
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	6000.00	11900.00
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....	0	0
26. Loan Repayments Made .....	0	0
27. Loans Made .....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs) .....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0	0
29. Other Disbursements .. <b>Bank Service Charge</b>	55.09	168.61
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share .....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6055.09	20268.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	6055.09	20268.61

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	480.25	13228.90
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	480.25	13228.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0	0
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0	0

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**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 1 OF 1

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

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

NAME OF COMMITTEE (In Full)  
**Blue Cross and Blue Shield of Kansas City Federal Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Tom Bowser</b>		Date of Receipt 07 / 16 / 2010
Mailing Address <b>2301 Main Street</b>		Amount of Each Receipt this Period <b>96.05</b>
City <b>Kansas City</b>	State <b>MO</b>	
FEC ID number of contributing federal political committee. <b>C 00301358</b>		<b>Other bi-monthly payroll deductions: \$96.05 each. Total \$480.25 7/30/2010 8/17/2010 9/1/2010 9/16/2010</b>
Name of Employer <b>Blue Cross and Blue Shield of Kansas City</b>	Occupation <b>CEO</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1728.90</b>	
<b>PAC Contribution</b>		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	<b>480.25</b>
TOTAL This Period (last page this line number only).....▶	<b>480.25</b>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 2

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

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 Cross and Blue Shield of Kansas City Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A.**

**Jim Barnett**

Mailing Address  
**1400 Lincoln Street**

City **Emporia** State **KS** Zip Code **66801**

Purpose of Disbursement  
**Contribution**

Candidate Name  
**Jim Barnett**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **KS** District: **1**

Date of Disbursement

MM / DD / YYYY  
**07 / 15 / 2010**

Amount of Each Disbursement this Period

**500.00**

**011**  
Category/  
Type

Full Name (Last, First, Middle Initial)

**B.**

**Kevin Yoder**

Mailing Address  
**5817 W. 100th Terrace**

City **Overland Park** State **KS** Zip Code **66207**

Purpose of Disbursement  
**Contribution**

Candidate Name  
**Kevin Yoder**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **KS** District: **3**

Date of Disbursement

MM / DD / YYYY  
**07 / 15 / 2010**

Amount of Each Disbursement this Period

**500.00**

**011**  
Category/  
Type

Full Name (Last, First, Middle Initial)

**C.**

**Jerry Moran**

Mailing Address  
**2758 Thunderbird Dr.**

City **Hays** State **KS** Zip Code **67601**

Purpose of Disbursement  
**Contribution**

Candidate Name  
**Jerry Moran**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **KS** District: **1**

Date of Disbursement

MM / DD / YYYY  
**07 / 15 / 2010**

Amount of Each Disbursement this Period

**1000.00**

**011**  
Category/  
Type

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

**2000.00**

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

10030431485

**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 2 OF 2				
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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 Cross and Blue Shield of Kansas City Federal Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Kevin Yoder</b>		Date of Disbursement 09 / 03 / 2010	
Mailing Address <b>5817 W. 100th Terrace</b>			
City <b>Overland Park</b>	State <b>KS</b>	Zip Code <b>66207</b>	
Purpose of Disbursement <b>Contribution</b>		<b>011</b>	Amount of Each Disbursement this Period
Candidate Name <b>Kevin Yoder</b>		Category/ Type	<b>2000.00</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: <b>KS</b>	District: <b>3</b>		

Full Name (Last, First, Middle Initial) <b>B. Sam Graves</b>		Date of Disbursement 09 / 29 / 2010	
Mailing Address <b>1251 Briarcliff Pkwy., Suite 85</b>			
City <b>Kansas City</b>	State <b>MO</b>	Zip Code <b>64116-1780</b>	
Purpose of Disbursement <b>Contribution</b>		<b>011</b>	Amount of Each Disbursement this Period
Candidate Name <b>Sam Graves</b>		Category/ Type	<b>2000.00</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: <b>MO</b>	District: <b>6</b>		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....▶	<b>4000.00</b>
TOTAL This Period (last page this line number only).....▶	<b>6000.00</b>

10030431486

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *Fed Ex* Shipping Date  
*9/30/10*  
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*EW*

*10/1/10*

PREPARER

DATE PREPARED

10030431487