

**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, INC. EMPLOYEE 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="2016"/>		<input type="text" value="19037.52"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="19918.31"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="3444.39"/>	<input type="text" value="6377.18"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="23362.70"/>	<input type="text" value="25414.70"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2052.00"/>	<input type="text" value="4104.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="21310.70"/>	<input type="text" value="21310.70"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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. 06/2004)

Page 3

Write or Type Committee Name

BLUE CROSS AND BLUE SHIELD OF KANSAS, INC. EMPLOYEE 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).....	2126.95	2966.95
(ii) Unitemized	1312.50	3400.60
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3439.45	6367.55
(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)	3439.45	6367.55
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.).....	4.94	9.63
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))..... ▶	3444.39	6377.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3444.39	6377.18

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	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.....	2052.00	4104.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) 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)) ..	2052.00	4104.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2052.00	4104.00

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)	3439.45	6367.55
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3439.45	6367.55
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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, INC. EMPLOYEE PAC

A. Matthew All
 Full Name (Last, First, Middle Initial)
 Mailing Address 403 Lawrence Ave
 City Lawrence State KS Zip Code 66046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSKS Occupation SVP & General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.4653
 Amount of Each Receipt this Period 175.00
 Memo Item
 \$25 for each of seven periods

B. Andrew Corbin
 Full Name (Last, First, Middle Initial)
 Mailing Address 6337 SW Hodges Road
 City Auburn State KS Zip Code 66402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSKS Occupation President & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.4656
 Amount of Each Receipt this Period 280.00
 Memo Item
 \$40 for each of seven periods

C. Paula Daoust
 Full Name (Last, First, Middle Initial)
 Mailing Address 4501 N. 111th St.
 City Kansas City State KS Zip Code 66109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSKS Occupation Director, Workforce & Leadership
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.4659
 Amount of Each Receipt this Period 140.00
 Memo Item
 \$20 for each of seven periods

SUBTOTAL of Receipts This Page (optional).....	595.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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, INC. EMPLOYEE PAC

A. Rusty Doty
 Full Name (Last, First, Middle Initial)
 Mailing Address 4611 SE Paulen Rd
 City Berryton State KS Zip Code 66409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSKS Occupation Director, Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt
 06 / 30 / 2016
Transaction ID : SA11AI.4660
 Amount of Each Receipt this Period
 140.00
 Memo Item
 \$20 for each of seven periods

B. Trena Mason
 Full Name (Last, First, Middle Initial)
 Mailing Address 6112 Blue Nile Drive
 City Lawrence State KS Zip Code 66049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSKS Occupation VP Ext Sales & Marketing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **325.00**

Date of Receipt
 06 / 30 / 2016
Transaction ID : SA11AI.4670
 Amount of Each Receipt this Period
 175.00
 Memo Item
 \$25 for each of seven periods

C. Mischa McHenry
 Full Name (Last, First, Middle Initial)
 Mailing Address 3314 SE 23rd Terr
 City Topeka State KS Zip Code 66605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSKS Occupation Director IS Services
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **325.00**

Date of Receipt
 06 / 30 / 2016
Transaction ID : SA11AI.4672
 Amount of Each Receipt this Period
 175.00
 Memo Item
 \$25 for each of seven periods

SUBTOTAL of Receipts This Page (optional).....	490.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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, INC. EMPLOYEE PAC

A. Frederick Palenske
 Full Name (Last, First, Middle Initial)
 Mailing Address 6225 Vorse Rd
 City Auburn State KS Zip Code 66402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSKS Occupation Sr VP Prov & Government Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **375.05**

Date of Receipt **06 / 30 / 2016**
Transaction ID : SA11AI.4675
 Amount of Each Receipt this Period **201.95**
 Memo Item
 \$28.85 for each of seven periods

B. Ronald Simmons
 Full Name (Last, First, Middle Initial)
 Mailing Address 3303 NW Bent Tree Lane
 City Topeka State KS Zip Code 66618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSKS Occupation VP Finance/CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1300.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : SA11AI.4685
 Amount of Each Receipt this Period **700.00**
 Memo Item
 \$100 for each of seven periods

C. Robert Young
 Full Name (Last, First, Middle Initial)
 Mailing Address 7942 SW 33rd
 City Topeka State KS Zip Code 66614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSKS Occupation VP Admin. Services & Human Dev
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 30 / 2016**
Transaction ID : SA11AI.4691
 Amount of Each Receipt this Period **140.00**
 Memo Item
 \$20 for each of seven periods

SUBTOTAL of Receipts This Page (optional).....	1041.95
TOTAL This Period (last page this line number only).....	2126.95

**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"/> 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, INC. EMPLOYEE PAC

Full Name (Last, First, Middle Initial)

A. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Monthly Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB22.4693**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Monthly Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB22.4694**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Monthly Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB22.4695**

Amount of Each Disbursement this Period

Memo Item

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

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