

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


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

|  |  |  |  |  |  | Fffice <br> Use <br> Only |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |

FEC Form 3X (Rev. 05/2016)

## Write or Type Committee Name <br> Blue Cross Blue Shield of Alabama PAC



| COLUMN A | COLUMN B |
| :--- | :---: |
| This Period | Calendar Year-to-Date |

6. (a) Cash on Hand January 1,

| Y-Y |
| :---: |
| 2018 |

(b) Cash on Hand at

Beginning of Reporting Period............



(d) Subtotal (add Lines 6(b) and

6(c) for Column A and Lines
6(a) and 6(c) for Column B) $\qquad$

165881.50
7. Total Disbursements (from Line 31) $\qquad$ $\square \rightarrow 60000.00$
8. Cash on Hand at Close of

Reporting Period
(subtract Line 7 from Line 6(d)) $\qquad$

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D) $\qquad$
0.00
10. Debts and Obligations Owed BY the Committee (Itemize all on
Schedule C and/or Schedule D) $\qquad$
0.00
$x$
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

## Write or Type Committee Name

Blue Cross Blue Shield of Alabama PAC

11. Contributions (other than loans) From:
(a) Individuals/Persons Other Than Political Committees
(i) Itemized (use Schedule A)............

|  |  | 5784.84 |
| :---: | :---: | :---: |
|  |  | 92.00 |
|  |  |  |
|  |  | 5876.84 |
|  |  | 0.00 |


|  |  | 41690.79 |
| :---: | :---: | :---: |
|  | , | 4451.20 |
|  |  | 46141.99 |
|  |  | 0.00 |
|  |  | 0.00 |

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)


| 1 |  | 46141.99 |
| :--- | :--- | :--- |
|  |  | 0.00 |
|  |  | 0.00 |
|  |  | 0.00 |
|  |  |  |
|  |  | 0.00 |

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees. $\qquad$
17. Other Federal Receipts
(Dividends, Interest, etc.) $\qquad$
18. Transfers from Non-Federal and Levin Funds
(a) Non-Federal Account
(from Schedule H3)...........................
(b) Levin Funds (from Schedule H5) .........
(c) Total Transfers (add 18(a) and 18(b))..

| 1 | 0.00 |  |
| :--- | :--- | :--- |
|  | , | 0.00 |
|  | , | 0.00 |

19. Total Receipts (add Lines 11(d),
$12,13,14,15,16,17$, and $18(\mathrm{c})) \ldots \ldots \ldots$.
20. Total Federal Receipts
(subtract Line 18(c) from Line 19) ......... $\square$

- 51141.99

FEC Form 3X (Rev. 05/2016)

## II. Disbursements

21. Operating Expenditures:
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)
(i) Federal Share $\qquad$ $\ldots$
(ii) Non-Federal Share. $\qquad$
(b) Other Federal Operating Expenditures $\qquad$
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))
22. Transfers to Affiliated/Other Party Committees.
23. Contributions to Federal Candidates/Committees and Other Political Committees.
24. Independent Expenditures (use Schedule E)
25. Coordinated Party Expenditures
(52 U.S.C. § 30116(d))
(use Schedule F) $\qquad$
26. Loan Repayments Made $\qquad$
27. Loans Made
28. Refunds of Contributions To:
(a) Individuals/Persons Other

Than Political Committees $\qquad$
(b) Political Party Committees $\qquad$
(c) Other Political Committees (such as PACs).
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) $\qquad$
$\qquad$
29. Other Disbursements (Including Non-Federal Donations) $\qquad$
0.00

COLUMN B Calendar Year-to-Date

0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))
(a) Allocated Federal Election Activity (from Schedule H6)
$\qquad$
(ii) "Levin" Share.
(b) Federal Election Activity Paid Entirely With Federal Funds $\qquad$
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))


31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..

32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31). $\qquad$
$\square$
60000.00

Page 5
FEC Form 3X (Rev. 05/2016)
III. Net Contributions/
33. Total Contributions (other than loans)
(from Line 11(d), page 3)
34. Total Contribution Refunds (from Line 28(d))
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ......... $\downarrow$
37. Offsets to Operating Expenditures (from Line 15, page 3) $\qquad$
38. Net Operating Expenditures (subtract Line 37 from Line 36) $\qquad$

COLUMN A
Total This Period

COLUMN B Calendar Year-to-Date



## 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 20 (check only one)


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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Echols, Molly, B, ,

Mailing Address 2 North Jackson St

| Mailing Address 2 North Jackson St |  |  |
| :---: | :---: | :---: |
| City <br> Montgomery | State <br> AL | $\begin{gathered} \hline \text { Zip Code } \\ 36104 \end{gathered}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS of AL |  | ion (for Individual) Internal Audit |
|  | Aggreg |  |

Date of Receipt


Transaction ID : PR122928036582
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Velezis, Michael, J., ,

Mailing Address 450 Riverchase Parkway East

| City <br> Birmingham | State AL | $\begin{array}{\|c\|} \hline \text { Zip Code } \\ \hline 35244 \\ \hline \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS AL |  | tion (for Individual) al Services |
|  | Aggreg | ar-to-Date $1458.31$ |

Date of Receipt


Transaction ID: PR125562736582
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Jarrett, Angela, D, ,

Mailing Address 2 North Jackson Street Suite 202

| City <br> Montgomery | State <br> AL | Zip Code <br> 36104 |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) |  |  |
| BLUPAC | Occupation (for Individual) <br> Receipt For: <br> Primary Claims \& Benefit Admin <br> Other (specify) |  |

## Date of Receipt



Transaction ID : PR130963536582
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)


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

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

FOR LINE NUMBER: PAGE 7 OF 20 (check only one)


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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Weaver, Darrel, Craig,,

Mailing Address 450 Riverchase Parkway East

| Mailing Address 450 Riverchase Parkway East |
| :--- |
| City <br> Birmingham |
| FEC ID number of contributing <br> federal political committee. |
| Name of Employer (for Individual) <br> AL |
| BLUPAC |
| Receipt For: <br> $\square$ <br> Primary $\quad \square$ <br> Other (specify) $\boldsymbol{\nabla}$ |

Date of Receipt


Amount of Each Receipt this Period
$\square 208.33$

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Keown, Kipp, D, ,

Mailing Address 450 Riverchase Parkway East

| City <br> Birmingham | State AL | $\begin{array}{\|c\|} \hline \text { Zip Code } \\ \hline 35244 \\ \hline \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BLUPAC |  | tion (for Individual) keting |
|  | Aggreg |  |

Date of Receipt


Transaction ID: PR132319736582
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Orr, Robert, R,

Mailing Address 1905 Balfour Dr

| City <br> Birmingham |
| :--- |
| FEC ID number of contributing <br> AL Zip Code <br> $35216-2703$ <br> federal political committee.  |
| Name of Employer (for Individual) <br> BCBS Alabama |
| Receipt For: <br> $\square$ Primary $\square$ General <br> Other (specify) |

## Date of Receipt



Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $624.99$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | - |

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

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

FOR LINE NUMBER: PAGE 8 OF 20 (check only one)


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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Vines, Timothy, , ,

Mailing Address 717 Savannah PI

| City Birmingham | State <br> AL | $\begin{aligned} & \hline \text { Zip Code } \\ & 35226-3262 \end{aligned}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) <br> President and CEO |  |
| Receipt For: Primary General Other (specify) | Aggrega | -to-Date <br> 1458.31 |

Date of Receipt

| $\begin{gathered} \mathrm{M}, \mathrm{M} \\ 07 \end{gathered}$ | $31$ | $\begin{aligned} & y-Y \\ & 2018 \end{aligned}$ |
| :---: | :---: | :---: |

Transaction ID : PR78823036582
Amount of Each Receipt this Period
$\square 208.33$

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Barth, John, Walter, ,

Mailing Address 212 Erwin Cir

| City <br> Birmingham | State <br> AL | Zip Code <br> $35216-1718$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) |  |  |
| BCBS Alabama |  | Occupation (for Individual) <br> Dept Mgr Cust Serv |
| Receipt For: <br> $\square$ <br> Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78825336582
Amount of Each Receipt this Period
$\square 27.14$

## Memo Item

P/R Deduction (\$13.57 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Berkery, Jonathan, T, ,

Mailing Address 703 Morris Blvd

| City Birmingham | State AL | Zip Code <br> $35209-6223$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Application Dev Manager |  |
|  | Aggrega | r-to-Date <br> 231.90 |


| SUBTOTAL of Receipts This Page (optional)................................................................. | $266.39$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | 5 - |

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

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

FOR LINE NUMBER: PAGE 9 OF 20 (check only one)


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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Bonner, Laura, H, ,

Mailing Address 226 Cambo Ter

| Mailing Address 226 Cambo Ter |  |
| :---: | :---: |
| City <br> Birmingham | State Zip Code <br> AL $35226-1078$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Dept Mgr Enrollment Services |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date |

Date of Receipt

| $\begin{gathered} \mathrm{M}, \mathrm{M} \\ 07 \end{gathered}$ | $31$ | $\begin{aligned} & y-Y \\ & 2018 \end{aligned}$ |
| :---: | :---: | :---: |

Transaction ID : PR78825536582
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Briggs, Dick, Dowling, ,

Mailing Address 4327 Kennesaw Dr

| City <br> Birmingham | State <br> AL | Zip Code <br> $35213-3311$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78825836582
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Bruner, William, G, ,

Mailing Address 812 Hickory Trace Cir

| City Birmingham | State <br> AL | Zip Code 35244-4545 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) District Manager |  |
| Receipt For: Primary General Other (specify) | Aggrega | r-to-Date $255.90$ |

## Date of Receipt



Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$17.06 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)................................................................. | $282.45$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | 5 - |

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

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

FOR LINE NUMBER: PAGE 10 OF 20 (check only one)


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 Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Carden, Noel, W, ,

Mailing Address 5783 Cypress Trce

| Mailing Address 5783 Cypress Trce |  |  |
| :---: | :---: | :---: |
| City <br> Birmingham | State <br> AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35244-5481 \\ \hline \end{array}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) Chief Actuary |
| Receipt For: Primary General Other (specify) | Aggrega | r-to-Date $1458.31$ |

Date of Receipt

| $\begin{gathered} \text { M } \\ 07 \end{gathered}$ | $\begin{gathered} D \\ \\ \hline 1 \end{gathered}$ | $\begin{aligned} & y-y \\ & 2018 \end{aligned}$ |
| :---: | :---: | :---: |

Transaction ID : PR78826336582
Amount of Each Receipt this Period
$\square 208.33$

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Council, Rebekah, Elgin, ,

Mailing Address 919 38th St S

| City <br> Birmingham | State <br> AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35222-3602 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) SVP \& Chief Marketing Officer |  |
| $\begin{aligned} & \text { Receipt For: } \\ & \square \text { Primary } \quad \square \text { General } \\ & \square \text { Other (specify) } \end{aligned}$ | Aggregat | r-to-Date <br> $1458: 31$ |

Date of Receipt


Transaction ID : PR78826936582
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DeCroes, Charles, B, ,

Mailing Address 1392 Belmont Ln

| City <br> Helena |
| :--- |
| FEC ID number of contributing <br> federal political committee. |
| State <br> AL |
| Name of Employer (for Individual) <br> BCBS Alabama |
| Receipt For: <br> $\square$ Primary <br> Other (specify) |
| General |

## Date of Receipt



Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $624.99$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | - |

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

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

FOR LINE NUMBER: PAGE 11 OF 20 (check only one)


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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

| Mailing Address 1921 Forest Knoll Dr |  |  |
| :---: | :---: | :---: |
| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35244-1431 \end{array}$ |
| FEC ID number of contributing federal political committee. |  |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Manager Database Admin |  |
|  | Aggreg | r-to-Date $225.00$ |

Date of Receipt

| $07^{M}$ | $\begin{gathered} D 1 \\ 31 \end{gathered}$ | $2018$ |
| :---: | :---: | :---: |

Transaction ID : PR78827336582
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Dunsmore, Joseph, Edward, ,

Mailing Address 4474 Heritage Park Dr

| City <br> Birmingham | State <br> AL | Zip Code <br> $35226-4171$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78827636582
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Edwards, Brian, D, ,

Mailing Address 107 Eagle Cove Dr

| City Pelham | State <br> AL | Zip Code 35124-2223 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) roller |
| Receipt For: Primary General Other (specify) | Aggreg | r-to-Date $1458.31$ |

Date of Receipt


Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)


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

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

FOR LINE NUMBER: PAGE 12 OF
20 (check only one)


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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Finley, Shirley, H, ,

Mailing Address 4221 Waterford Ln

| City Trussville | State <br> AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35173-1567 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) Management Dept Mgr |
| Receipt For: Primary General Other (specify) | Aggrega | r-to-Date $247.05$ |

Date of Receipt

P/R Deduction (\$16.47 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Hamlin, Elizabeth, A,

Mailing Address PO Box 361343

| City <br> Birmingham | State <br> AL | Zip Code <br> $35236-1343$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. |  |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> $\square$Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78828436582
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$18.08 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Harrison, Harold, Wayne, ,

Mailing Address 1104 Walnut Cir

| City <br> Alabaster | State <br> AL | Zip Code <br> $35007-9300$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) | Occupation (for Individual) <br> Dept Mgr Health Care Networks |  |
| RCBS Alabama  <br> Receipt For:  <br> Primary <br> Other (specify) Aggregate Year-to-Date $\boldsymbol{\nabla}$ |  |  |

Date of Receipt


Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$16.89 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)................................................................. | $102.88$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | 5 - |

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

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

FOR LINE NUMBER: PAGE 13 OF 20 (check only one)


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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

| Mailing Address 304 fox valley highlands cr |  |  |
| :---: | :---: | :---: |
| City Maylene | State AL | $\begin{array}{\|c} \hline \text { Zip Code } \\ 35114 \end{array}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | (for Individual) ness Development |
| Receipt For: $\square$ Primary $\square$ General $\square$ Other (specify) $\nabla$ | Aggreg | r-to-Date $1458.31$ |

Date of Receipt

| $07$ | $\begin{gathered} D \quad D \\ 31 \end{gathered}$ | 2018 |
| :---: | :---: | :---: |

Transaction ID : PR78829036582
Amount of Each Receipt this Period
$\square 208.33$

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Ingrum, Jeffrey, A,

Mailing Address 4008 Charring Cross Ln

| City <br> Birmingham | State <br> AL | Zip Code <br> $35226-2092$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> $\square$Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78829236582
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Johnson, David, C, ,

Mailing Address 2508 wilowbrook cr

| City Birmingham | State AL | $\begin{array}{\|c\|} \hline \text { Zip Code } \\ 35242 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) Consult Technical Adv |
|  | Aggrega | r-to-Date <br> 270.00 |


| SUBTOTAL of Receipts This Page (optional)................................................................ | $452.66$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)...................................................... |  |

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

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

FOR LINE NUMBER: PAGE 14 OF 20 (check only one)


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 Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Lyda, John, B, ,

Mailing Address 3484 Tamassee Ln

| Mailing Address 3484 Tamassee Ln |  |
| :---: | :---: |
| City <br> Birmingham | State Zip Code <br> AL $35226-2671$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) <br> Manager Claims Operations |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ |

Date of Receipt


Transaction ID : PR78830636582
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Mackin, Carol, D, ,

Mailing Address 809 Royal Ter

| City <br> Birmingham | State <br> AL | Zip Code <br> $35242-7222$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78830736582
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Moor, John, Matthew, , |  |  | Date of Receipt |
| :---: | :---: | :---: | :---: |
| Mailing Address 18 Montcrest Dr |  |  |  |
| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35213-3022 \end{array}$ | Transaction ID : PR78831336582 |
|  |  |  | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. |  |  | $208.33$ |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) | Memo Item <br> P/R Deduction (\$208.33 Monthly) |
|  | Aggrega | $\text { ar-to-Date } \boldsymbol{\nabla}$ |  |
| SUBTOTAL of Receipts This Page (optional) |  |  | $\square, \quad 446.66$ |
| TOTAL This Period (last page this line number only).................................................... |  |  |  |

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

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

FOR LINE NUMBER: PAGE 15 OF 20 (check only one)


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 Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Morris, Joe, S, ,

Mailing Address 908 Lakeview Estates Dr

| City <br> Bessemer | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35023-5810 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) <br> Facilities Operations |
| Receipt For: Primary General Other (specify) | Aggreg | r-to-Date $281.40$ |

Date of Receipt

| $07$ | $\begin{gathered} D \quad D \\ 31 \end{gathered}$ | $\begin{aligned} & Y-Y \\ & 2018 \end{aligned}$ |
| :---: | :---: | :---: |

Transaction ID : PR78831536582
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Morrissette, John, M,

Mailing Address 1515 Amherst Cir

| City <br> Birmingham | State <br> AL | Zip Code <br> $35216-1009$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. |  |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> $\square$ <br> Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78831636582
Amount of Each Receipt this Period

Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mosko, Ashley, S, , |  |  | Date of Receipt |
| :---: | :---: | :---: | :---: |
| Mailing Address 503 Olmsted St |  |  |  |
| City | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35242-1825 \end{array}$ |  |
| Birmingham |  |  | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. |  |  | $208.33$ |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) th Management | Memo Item <br> P/R Deduction (\$208.33 Monthly) |
| Receipt For: Primary General Other (specify) | Aggrega $\square$ | r-to-Date $1458.31$ |  |
| SUBTOTAL of Receipts This Page (optional) |  |  | $\square \quad, \quad 295.85$ |
| TOTAL This Period (last page this line number only)........................................................... |  |  |  |

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

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

FOR LINE NUMBER: PAGE 16 OF 20 (check only one)


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 Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

| Mailing Address 101 Creekwood Ln |  |  |
| :---: | :---: | :---: |
| City Helena | State <br> AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35080-3273 \end{array}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Director Info Security/CISO |  |
| Receipt For: Primary General Other (specify) | Aggreg | r-to-Date $300.00$ |

Date of Receipt

| $07^{M}$ | $\begin{gathered} D 1 \\ 31 \end{gathered}$ | $2018$ |
| :---: | :---: | :---: |

Transaction ID : PR78831936582
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Patterson, Michael, L, ,

Mailing Address 1809 Lucinda Robey PI

| City <br> Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35211-3872 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) d Chief Legal Officer |
| Receipt For: Primary General Other (specify) | Aggrega |  |

Date of Receipt


Transaction ID : PR78832036582
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

## Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Platt, David, E, ,

Mailing Address 3700 Montevallo Rd S

| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35213-4208 \\ \hline \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) e Group Sales |
| Receipt For: Primary General Other (specify) | Aggreg | r-to-Date $869.19$ |

Date of Receipt


Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)


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

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

FOR LINE NUMBER: PAGE 17 OF 20 (check only one)


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 Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Saxon, Vickie, L, ,

Mailing Address 4127 Heatherhedge Ln

| City <br> Birmingham | State <br> AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35226-2095 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) terprise Resources |
| Receipt For: Primary General Other (specify) | Aggrega | r-to-Date $1458.31$ |

Date of Receipt

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Smith, Mary, C,

Mailing Address 5440 Magnolia Trce

| City <br> Birmingham | State <br> AL | Zip Code <br> $35244-4533$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78833236582
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Steed, Clay, T, ,

Mailing Address 334 Lennox Sq

| City <br> Fairhope | State <br> AL | Zip Code <br> $36532-7519$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) | Occupation (for Individual) <br> Mgr Large Group Sales/Acct Mgt |  |
| RCBS Alabama  <br> Receipt For:  <br> Primary <br> Other (specify) Aggregate Year-to-Date $\nabla$ |  |  |

Date of Receipt


Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$14.07 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)................................................................. | $, \quad, \quad 444.80$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | 5 - |

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

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

FOR LINE NUMBER: PAGE 18 OF (check only one)


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 Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Stone, Joseph, Robin,

Mailing Address 3755 Everest Dr


Date of Receipt

| $\begin{gathered} \mathrm{M}, \mathrm{M} \\ 07 \end{gathered}$ | $31$ | $\begin{aligned} & y-Y \\ & 2018 \end{aligned}$ |
| :---: | :---: | :---: |

Transaction ID : PR78833636582
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Vice, Cynthia, M,

Mailing Address 936 Beech Ln

| City <br> Birmingham | State <br> AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35213-2024 \\ \hline \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) SVP \& Chief Financial Officer |  |
|  | Aggrega | r-to-Date <br> 1458.31 |

Date of Receipt


Transaction ID : PR78834336582
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Walden, Joseph, Clay, ,

## Mailing Address 14 Signal Hill Rd

| City <br> Spanish Fort | State <br> AL | Zip Code <br> $36527-3138$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) | Occupation (for Individual) <br> District Manager |  |
| BCBS Alabama  <br> Receipt For:  <br> Primary <br> Other (specify) Aggregate Year-to-Date $\mathbf{V}$ |  |  |


| SUBTOTAL of Receipts This Page (optional)................................................................. | $370.95$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)...................................................... | - |

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

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

FOR LINE NUMBER: PAGE 19 OF 20 (check only one)


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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Ward, Brandon, S, ,

Mailing Address 109 Coshatt Trl

| Mailing Address 109 Coshatt Trl |  |
| :---: | :---: |
| City Birmingham | State Zip Code <br> AL $35244-2439$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) VP Business Services |
|  | Aggregate Year-to-Date <br> 1458.31 |

Date of Receipt

| $\begin{gathered} \mathrm{M}, \mathrm{M} \\ 07 \end{gathered}$ | $31$ | $\begin{aligned} & y-Y \\ & 2018 \end{aligned}$ |
| :---: | :---: | :---: |

Transaction ID : PR78834636582
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Warren, Susan, M,

Mailing Address 2021 Chandapine Cir

| City <br> Pelham | State <br> AL | Zip Code <br> $35124-1430$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. |  |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> $\square$Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78834736582
Amount of Each Receipt this Period
$\square \quad 37.84$

## Memo Item

P/R Deduction (\$18.92 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Watkins, James, M, ,

Mailing Address 1935 Red Oak Ln NE

| City <br> Arab | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35016-5360 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | $\mathrm{C}$ |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) Manager |
| Receipt For: Primary General Other (specify) | Aggreg | r-to-Date $285.75$ |

## Date of Receipt



Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$19.05 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $284.27$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | - |

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

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

FOR LINE NUMBER: PAGE 20 OF 20 (check only one)


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nAME OF COMMItTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Williams, John, T, ,

Mailing Address 8625 Anna PI

| Mailing Address 8625 Anna PI |  |
| :---: | :---: |
| City <br> Montgomery | State Zip Code <br> AL $36116-6693$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Dir District \& Consumer Sales |
|  | Aggregate Year-to-Date $\square$ |

Date of Receipt

| $07$ | $\begin{gathered} D \quad D \\ 31 \end{gathered}$ | $\begin{aligned} & Y-Y \\ & 2018 \end{aligned}$ |
| :---: | :---: | :---: |

Transaction ID : PR78835036582
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Hill, James, S,

Mailing Address 130 Hampton Drive

| City <br> Pelham | State <br> AL | Zip Code <br> 35244 |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS AL | Occupation (for Individual) <br> SVP Business Operations |  |
| Receipt For: <br> $\square$ <br> Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR94042836582
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

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

## Mailing Address



## Date of Receipt



## Amount of Each Receipt this Period



| SUBTOTAL of Receipts This Page (optional)................................................................. | $235.85$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)........................................................ | , 5784.84 |

