REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
BluePAC (Capital, Independence, Northeastern, and Western Pennsylvania Blue Cross Plans)

ADDRESS (number and street) ☐ Check if different than previously reported
Pennsylvania Blue Cross Plans PAC
c/o Linda Melusky

CITY, STATE and ZIP CODE
2500 Elmerton Avenue
Harrisburg, Pa 17177

2. FEC IDENTIFICATION NUMBER
C00270967

3. [XX] This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
[XX] January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____ in the State of _____.

(b) Is this Report an Amendment? ☐ YES [XX] NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 07/01/95 through 12/31/95		
6. (a) Cash on Hand January 1, 19 95		$ 14,148.57
(b) Cash on Hand at Beginning of Reporting Period	$ 20,894.07	
(c) Total Receipts (from Line 18)	$ 57,623.25	$ 110,754.75
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 78,517.32	$ 124,903.32
7. Total Disbursements (from Line 30)	$ 57,127.03	$ 103,513.03
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 21,390.29	$ 21,390.29
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	$ 0.00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	$ 0.00	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
Linda Melusky

Signature of Treasurer
Linda Melusky

Date
1/22/96

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3X
(revised 9/93)

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: BluePAC Pennsylvania Blue Cross Plans PAC

REPORT COVERING PERIOD FROM 07/01/95 TO: 12/31/95

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	$ 29,653.00	$ 43,148.50	11(a)(i)
ii. Unitemized	$ 27,970.25	$ 67,606.25	11(a)(ii)
iii. Total (add i and ii) ➤	$ 57,623.25	$ 110,754.75	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	$ 57,623.25	$ 110,754.75	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	$ 57,623.25	$ 110,754.75	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	$ 57,623.25	$ 110,754.75	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures	$ 18.79	$ 508.79	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	$ 18.79	$ 508.79	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	$ 10,200.00	$ 17,850.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements	$ 46,908.24	$ 85,154.24	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	$ 57,127.03	$ 103,513.03	30
31. Total Federal Disbursements (subtract line 21 a i from line 30) ➤	$ 57,127.03	$ 103,513.03	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	$ 57,623.25	$ 110,754.75	32
33. Total Contribution Refunds (from line 28d)	$ 0.00	$ 0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	$ 57,623.25	$ 110,754.75	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	$ 18.79	$ 508.79	35
36. Offsets to Operating Expenditures (from line 15)	$ 0.00	$ 0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	$ 18.79	$ 508.79	37

FE6/N066

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 21

FOR LINE NUMBER 11.a .i.

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NAME OF COMMITTEE (in Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Daniel R. Holtz 1502 Oak Street Oakmont, Pa 15139	BC - WPA	Payroll Deduction	$ 240.00
Receipt For: ☐ Primary ☐ General	Occupation: Vice President		
☐ Other (specify):	Aggregate Year-to-Date > $ 480.00		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Christine Kobus 5 Fieldview Lane Pittsburgh, Pa 15215	BC - WPA	Payroll Deduction	$ 240.00
Receipt For: ☐ Primary ☐ General	Occupation: Vice President		
☐ Other (specify):	Aggregate Year-to-Date > $ 480.00		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dana Lundquist P.O. Box 22130 Pittsburgh, Pa 15222	BC - WPA	Payroll Deduction	$ 300.00
Receipt For: ☐ Primary ☐ General	Occupation: Vice President		
☐ Other (specify):	Aggregate Year-to-Date > $ 600.00		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eugene Susi 1347 Main Street Pittsburgh, Pa 15215	BC - WPA	Payroll Deduction	$ 300.00
Receipt For: ☐ Primary ☐ General	Occupation: Vice President		
☐ Other (specify):	Aggregate Year-to-Date > $ 600.00		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gus Georgiadis 708 Highpoint Drive Wexford, Pa 15090	BC - WPA	Payroll Deduction	$ 240.00
Receipt For: ☐ Primary ☐ General	Occupation: Senior Vice President		
☐ Other (specify):	Aggregate Year-to-Date > $ 480.00		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Lowry 1054 Norse Drive Pittsburgh, Pa 15220	BC - WPA	Payroll Deduction	$ 1,200.00
Receipt For: ☐ Primary ☐ General	Occupation: President and C.E.O.		
☐ Other (specify):	Aggregate Year-to-Date > $ 2175.00		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Meed 201 Hearth Road Camp Hill, Pa 17011	Capital Blue Cross	Payroll Deduction	$ 390.00
Receipt For: ☐ Primary ☐ General	Occupation: President		
☐ Other (specify):	Aggregate Year-to-Date > $ 780.00		

SUBTOTAL	# Receipts This Page (optional) ..... >	$ 2,910.00
TOTAL	This Period (last page this line number only) ..... >	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11.a .i.

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NAME OF COMMITTEE (in Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code Charles Barker Seal & Log Cabin Road Perkasie, Pa 18944	Name of Employer Independence Blue Cross	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 325.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Senior Director		
	Aggregate Year to Date > $	650.00	
B. Full Name, Mailing Address and ZIP Code Royal Brown 1429 S. 15th Street Philadelphia, Pa 19146	Name of Employer Independence Blue Cross	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 260.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Senior Director		
	Aggregate Year-to-Date > $	520.00	
C. Full Name, Mailing Address and ZIP Code Christopher Butler 1 Brampton Road Malvern, Pa 19355	Name of Employer Independence Blue Cross	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 520.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Senior Vice President		
	Aggregate Year-to-Date > $	1040.00	
D. Full Name, Mailing Address and ZIP Code Joseph Carroll 114 Old Chester Road Essex Falls, NJ 07021	Name of Employer Independence Blue Cross	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 260.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Chief Info Officer		
	Aggregate Year-to-Date > $	520.00	
E. Full Name, Mailing Address and ZIP Code John Dadds 8 Glenlake Drive Medford, NJ 08055	Name of Employer Independence Blue Cross	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 500.11
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Senior Vice President		
	Aggregate Year-to-Date > $	1000.22	
F. Full Name, Mailing Address and ZIP Code G. Fred DiBona Jr 657 Heather Lane Bryn Mawr, Pa 19010	Name of Employer Independence Blue Cross	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 899.99
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation President		
	Aggregate Year-to-Date > $	1799.98	
G. Full Name, Mailing Address and ZIP Code Robert English 4 Lamplighter Lane Shamong, NJ 08068	Name of Employer Independence Blue Cross	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 260.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date > $	520.00	

SUBTOTAL	of Receipts This Page (optional) .... >	$ 8,025.10
TOTAL	This Period (last page this line number only) ... . >	

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 3 OF 21

FOR LINE NUMBER 11.a. .i.

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Falcu 27 Mobil Drive Waterford, NJ 08089	Independence Blue Cross	Payroll Deduction	$ 280.00
Receipt For: ☐ Primary ☐ General	Occupation: Director		
☐ Other (specify):	Aggregate Year-to-Date > $ 480.00		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kathryn Farley 315 Valley Forge Road, #2A Devon, Pa 19333	Independence Blue Cross	Payroll Deduction	$ 280.00
Receipt For: ☐ Primary ☐ General	Occupation: Vice President		
☐ Other (specify):	Aggregate Year-to-Date > $ 520.00		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronon Fasce 703 Country Club Parkway Mt Laurel, NJ 08054	Independence Blue Cross	Payroll Deduction	$ 350.00
Receipt For: ☐ Primary ☐ General	Occupation: Senior Vice President		
☐ Other (specify):	Aggregate Year-to-Date > $ 620.00		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Foos 1018 Lorien Drive Gwynedd Valley, Pa 19437	Independence Blue Cross	Payroll Deduction	$ 530.00
Receipt For: ☐ Primary ☐ General	Occupation: Chief Financial Officer		
☐ Other (specify):	Aggregate Year-to-Date > $ 985.00		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Frick 7 Moore Circle Media, Pa 19063	Independence Blue Cross	Payroll Deduction	$ 325.00
Receipt For: ☐ Primary ☐ General	Occupation: Vice President		
☐ Other (specify):	Aggregate Year-to-Date > $ 850.00		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Vail Garvin 399 Relay Lane Warminster, Pa 18974	Independence Blue Cross	Payroll Deduction	$ 374.40
Receipt For: ☐ Primary ☐ General	Occupation: Senior Vice President		
☐ Other (specify):	Aggregate Year-to-Date > $ 748.80		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Gillian 83 Mount Lucas Road Princeton, NJ 08540	Independence Blue Cross	Payroll Deduction	$ 360.00
Receipt For: ☐ Primary ☐ General	Occupation: Vice President		
☐ Other (specify):	Aggregate Year-to-Date > $ 620.00		

SUBTOTAL of Receipts This Page (optional)	>	$ 2,459.40
TOTAL This Period (last page this line number only)	>	

3 4 0 2 1 7 4 5 0 3

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code Michael Green 517 Brights Lane Penlyn, Pa 19422	Name of Employer Independence Blue Cross	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 325.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date > $	650.00	
B. Full Name, Mailing Address and ZIP Code Barbara Gregus 210 Fawn Drive Harleysville, Pa 19438	Name of Employer Independence Blue Cross	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 260.00
Receipt For ☐ Primary ☐ General ☐ Other (specify):	Occupation Manager		
	Aggregate Year-to-Date > $	520.00	
C. Full Name, Mailing Address and ZIP Code William Haggett 438 Kings Highway East Haddonfield, NJ 08033	Name of Employer Independence Blue Cross	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 325.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date > $	650.00	
D. Full Name, Mailing Address and ZIP Code Marie Hatam, M.D. P.O. Box 243 Maple Shade, NJ 08052	Name of Employer Independence Blue Cross	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 260.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Medical Director		
	Aggregate Year-to-Date > $	520.00	
E. Full Name, Mailing Address and ZIP Code Joseph Henry 237 Leona Avenue Huntingdon Valley, Pa 19006	Name of Employer Independence Blue Cross	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 208.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Director		
	Aggregate Year-to-Date > $	416.00	
F. Full Name, Mailing Address and ZIP Code Bruce Herdman 2128 Lombard Street Philadelphia, Pa 19146	Name of Employer Independence Blue Cross	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 260.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date > $	520.00	
G. Full Name, Mailing Address and ZIP Code Michael Hobson 31 Oakford Road Wayne, Pa 19087	Name of Employer Independence Blue Cross	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 260.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Acct. Executive		
	Aggregate Year-to-Date > $	505.00	

SUBTOTAL	of Receipts This Page (optional) ..... >	$ 1,888.00
TOTAL	This Period (last page this line number only) ..... >	

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Hughes 804 Westdale Avenue Swarthmore, Pa 19081	Independence Blue Cross	Payroll Deduction	$ 260.00
Receipt For: ☐ Primary ☐ General	Occupation: Senior Director		
☐ Other (specify):	Aggregate Year-to-Date > $ 520.00		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert McKown 609 Bryn Mawr Haddonfield, NJ 08033	Independence Blue Cross	Payroll Deduction	$ 650.00
Receipt For: ☐ Primary ☐ General	Occupation: Senior Vice President		
☐ Other (specify):	Aggregate Year-to-Date > $ 1300.00		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Ellen McMillan 5487 Grouse Drive Harrisburg, Pa 17111	Independence Blue Cross	Payroll Deduction	$ 500.50
Receipt For: ☐ Primary ☐ General	Occupation: Vice President		
☐ Other (specify):	Aggregate Year-to-Date > $ 885.50		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Nolan 2938 Sunset Avenue Norristown, Pa 19403	Independence Blue Cross	Payroll Deduction	$ 325.00
Receipt For: ☐ Primary ☐ General	Occupation: Vice President		
☐ Other (specify):	Aggregate Year to Date > $ 650.00		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Pappalardo 240 Tall Pines Drive East Sewell, NJ 08080	Independence Blue Cross	Payroll Deduction	$ 455.00
Receipt For: ☐ Primary ☐ General	Occupation: Senior Vice President		
☐ Other (specify):	Aggregate Year to Date > $ 880.00		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rosemary Park 210 Carlton Avenue Westmont, NJ 08108	Independence Blue Cross	Payroll Deduction	$ 260.00
Receipt For: ☐ Primary ☐ General	Occupation: Senior Vice President		
☐ Other (specify):	Aggregate Year-to-Date > $ 520.00		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Sheinian 8 Brookwood Drive Medford, NJ 08055	Independence Blue Cross	Payroll Deduction	$ 40.00
Receipt For: ☐ Primary ☐ General	Occupation: Chief Marketing Officer		
☐ Other (specify):	Aggregate Year-to-Date > $ 300.00		

SUBTOTAL of Receipts This Page (optional)	>	$ 2,490.50
TOTAL This Period (last page this line number only)	>	

SCHEDULE A **ITEMIZED RECEIPTS**

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PAGE 6 OF 21

FOR LINE NUMBER 11.a .i.

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. John Tighe 221 Standish Road Merion, Pa 19066 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Independence Blue Cross Senior Vice President Aggregate Year-to-Date > $ 650.00	Payroll Deduction	$ 325.00
B. John Zamzow 231 Cheswold Lane Haverford, Pa 19041 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Independence Blue Cross Senior Vice President Aggregate Year-to-Date > $ 780.00	Payroll Deduction	$ 390.00
C. Stephen Zuckner 856 Montach Drive Wayne, Pa 19087 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Independence Blue Cross Vice President Aggregate Year-to-Date > $ 416.00	Payroll Deduction	$ 208.00
D. Gunter Siemeen 31 High Point Drive Medford, NJ 08055 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Independence Blue Cross Senior Vice President Aggregate Year-to-Date > $ 250.00	2/22/95	$
E. Michael McGinley 211 Indian Creek Drive Mechanicsburg, Pa 17055 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Capital Blue Cross Senior Vice President Aggregate Year-to-Date > $ 260.00	Payroll Deduction	$ 130.00
F. Mark Brown 50 North 30th Street Camp Hill, Pa 17011 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Capital Blue Cross Salesperson Aggregate Year-to-Date > $ 260.00	Payroll Deduction	$ 130.00
G. Francis Osolowski 420 South Franklin Street Palmyra, Pa 17078 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Capital Blue Cross Director Aggregate Year-to-Date > $ 260.00	Payroll Deduction	$ 130.00

SUBTOTAL of Receipts This Page (optional) > $ 1,313.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11.a .i.

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Lee Van Valkenburg 2901 Nathion Road Camp Hill, Pa 17011 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Capital Blue Cross Occupation: Vice President Aggregate Year-to-Date > $ 208.00	Payroll Deduction	$ 104.00
Kathleen Salmon 1781 Autumnwood Drive Mechanicsburg, Pa 17055 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Capital Blue Cross Occupation: Senior Vice President Aggregate Year-to-Date > $ 260.00	Payroll Deduction	$ 130.00
Robert Markel 521 9th Street New Cumberland, Pa 17070 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Capital Blue Cross Occupation: Senior Vice President Aggregate Year-to-Date > $ 260.00	Payroll Deduction	$ 130.00
William Hilderhoff 3971 Brookridge Road Mechanicsburg, Pa 17055 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Capital Blue Cross Occupation: Director Aggregate Year-to-Date > $ 260.00	Payroll Deduction	$ 130.00
Jackson, Nell 4 Dulles Drive West Camp Hill, Pa 17011 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Capital Blue Cross Occupation: Supervisor Aggregate Year-to-Date > $ 260.00	Payroll Deduction	$ 130.00
David Striebinger 38 Mosher Road Glenmore, NY 12077 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Capital Blue Cross Occupation: Director Aggregate Year-to-Date > $ 260.00	Payroll Deduction	$ 130.00
Robert Baer 504 Lenox Avenue Pittsburgh, Pa 15221 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	BC WPA Occupation: Director Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 120.00

SUBTOTAL of Receipts This Page (optional) > $ 874.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11.a i

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)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Baumgartner 228 Kinsura Drive Pittsburgh, Pa 15237	BC - WPA	Payroll Deduction	$ 400.00
Receipt For: Primary General	Occupation: Vice President		
Other (specify):	Aggregate Year to Date > $ 620.00		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Geoffrey Coleman 1642 Augusta Drive Pittsburgh, Pa 15237	BC - WPA	Payroll Deduction	$ 120.00
Receipt For: Primary General	Occupation: Director		
Other (specify):	Aggregate Year-to-Date > $ 240.00		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Conti 2353 Springhill Road Pittsburgh, Pa 15245	BC - WPA	Payroll Deduction	$ 165.00
Receipt For: Primary General	Occupation: Vice President		
Other (specify):	Aggregate Year-to-Date > $ 345.00		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Dillinger 817 Esther Avenue New Kensington, Pa 15068	BC - WPA	Payroll Deduction	$ 90.00
Receipt For: Primary General	Occupation: Manager		
Other (specify):	Aggregate Year-to-Date > $ 210.00		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
June Dowdy 729 Harden Drive Pittsburgh, Pa 15229	BC - WPA	Payroll Deduction	$ 120.00
Receipt For: Primary General	Occupation: Director		
Other (specify):	Aggregate Year-to-Date > $ 240.00		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dean Eckenrode 30 Hermann Avenue Belmont, Pa 15675	BC - WPA	Payroll Deduction	$ 270.00
Receipt For: Primary General	Occupation: Vice President		
Other (specify):	Aggregate Year-to-Date > $ 590.00		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Victoria Eisenreich 9886 Parkland Drive Wexford, Pa 15090	BC - WPA	Payroll Deduction	$ 220.00
Receipt For: Primary General	Occupation: Director		
Other (specify):	Aggregate Year-to-Date > $ 240.00		

SUBTOTAL	of Receipts This Page (optional) >	$ 1,385.00
TOTAL	This Period (last page this line number only) >	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11.a .i.

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Timothy Foley 710 Maitland Court Mars, Pa 16046	BC - WPA President	Payroll Deduction	$ 180.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 360.00		
Keith Kapsmeyer 203 North Woodland Road Pittsburgh, Pa 15232	BC - WPA Vice President	Payroll Deduction	$ 480.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 800.00		
Marilyn Koch 237 Cochran Road Mt. Lebanon, Pa 15228	BC - WPA Vice President	Payroll Deduction	$ 120.00
Receipt For ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 240.00		
Marcia Martin 1900 Garrick Drive Pittsburgh, Pa 15235	BC - WPA Director	Payroll Deduction	$ 120.00
Receipt For ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 240.00		
Wayne Mains 1108 Goodman Street Pittsburgh, Pa 15218	BC - WPA Director	Payroll Deduction	$ 120.00
Receipt For ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 240.00		
John McDermott 101 Manorview, Apt #504 Pittsburgh, Pa 15220	BC - WPA Director	Payroll Deduction	$ 120.00
Receipt For ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 240.00		
Kenneth Melani 322C Hawkins Run Road Cheswick, Pa 15024	BC - WPA Vice President	Payroll Deduction	$ 500.00
Receipt For ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 500.00		

SUBTOTAL	of Receipts This Page (optional) >	$ 1,640.00
TOTAL	This Period (last page this line number only) >	

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 10 OF 21

FOR LINE NUMBER 11.a .i.

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NAME OF COMMITTEE (in Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code Robert Mill 1921 Brandywine Drive Allison Park, Pa 15101	Name of Employer BC - WPA	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 180.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Director		
	Aggregate Year-to-Date > $	360.00	
B. Full Name, Mailing Address and ZIP Code Paul O'Palka 516 8th Street Ambridge, Pa 15003	Name of Employer BC - WPA	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 120.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Director		
	Aggregate Year-to-Date > $	240.00	
C. Full Name, Mailing Address and ZIP Code David O'Brien 8460 Jackson Street Pittsburgh, Pa 15208	Name of Employer BC - WPA	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 120.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation President		
	Aggregate Year-to-Date > $	240.00	
D. Full Name, Mailing Address and ZIP Code K. Henry Pearson 130 Swallow Hill Court Pittsburgh, Pa 15220	Name of Employer BC - WPA	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 120.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation Manager		
	Aggregate Year-to-Date > $	240.00	
E. Full Name, Mailing Address and ZIP Code Mary Pollick 20 Park Drive Cheswick, Pa 15024	Name of Employer BC - WPA	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 120.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Director		
	Aggregate Year-to-Date > $	240.00	
F. Full Name, Mailing Address and ZIP Code James Pulver 2693 Club House Drive Wexford, Pa 15090	Name of Employer BC - WPA	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 120.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify).	Occupation Vice President		
	Aggregate Year to Date > $	240.00	
G. Full Name, Mailing Address and ZIP Code Michael Romano 924 Balmoral Drive Pittsburgh, Pa 15237	Name of Employer BC - WPA	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 520.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date > $	640.00	

SUBTOTAL	of Receipts This Page (optional) . . . . . >	$ 1,300.00
TOTAL	This Period (last page this line number only) . . . . . >	

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 11 OF 21

FOR LINE NUMBER 11.a .i.

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code Douglas Saltzman 5630 Library Road, Apt. #301 Bethel Park, Pa. 15102 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: BC - WPA Occupation: State Relations Coordinator Aggregate Year-to-Date > $	Payroll Deduction 252.00	$ 126.00
B. Full Name, Mailing Address and ZIP Code John Schafer 2910 Patterson Drive Aliquippa, Pa. 15001 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: BC - WPA Occupation: Manager Aggregate Year-to-Date > $	Payroll Deduction 240.00	$ 120.00
C. Full Name, Mailing Address and ZIP Code Anna Soberman 500 Wood Street Pittsburgh, Pa. 15222 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: BC - WPA Occupation: Executive Director Aggregate Year-to-Date > $	Payroll Deduction 210.00	$ 160.00
D. Full Name, Mailing Address and ZIP Code Tom Shidebaker 1266 San Pedro Drive Pittsburgh, Pa. 15212 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: BC - WPA Occupation: Director Aggregate Year-to-Date > $	Payroll Deduction 240.00	$ 120.00
E. Full Name, Mailing Address and ZIP Code John Winslow 951 Perry Highway, Suite 334 Pittsburgh, Pa. 15237 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: BC - WPA Occupation: Business Manager Aggregate Year-to-Date > $	Payroll Deduction 240.00	$ 120.00
F. Full Name, Mailing Address and ZIP Code Joseph McCarthy 931 Lasalle Street Pittsburgh, Pa. 15218 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: BC - WPA Occupation: Director Aggregate Year-to-Date > $	Date (month, day, year) 9/8/95 250.00	$ 250.00
G. Full Name, Mailing Address and ZIP Code T. J. Wind 503 Clark Avenue Clarks Summit, Pa. 18411 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: BC - NEPA Occupation: President Aggregate Year-to-Date > $	Payroll Deduction 312.00	$ 156.00

SUBTOTAL	of Receipts This Page (optional) >	$ 1,042.00
TOTAL	This Period (last page this line number only) >	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11.B .I.

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NAME OF COMMITTEE (in Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
G. M. Guerlie 66 Foore Avenue Duryea, Pa. 18642	BC - NEPA	Payroll Deduction	$ 130.00
Receipt For: ☐ Primary ☐ General	Occupation: Legislative Liason		
☐ Other (specify):	Aggregate Year-to-Date > $ 260.00		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
B. Hoyghue Box 1044 Wilkes-Barre, Pa. 18703	BC - NEPA	Payroll Deduction	$ 130.00
Receipt For: ☐ Primary ☐ General	Occupation: Sales Director		
☐ Other (specify):	Aggregate Year-to-Date > $ 260.00		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stan Adamczyk 265 Scott Road Perkasie, Pa. 18944	Independence Blue Cross	Payroll Deduction	$ 130.00
Receipt For: ☐ Primary ☐ General	Occupation: Director		
☐ Other (specify):	Aggregate Year-to-Date > $ 260.00		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joanne Agosterola 23 Darien Drive Cherry Hill, NJ 08003	Independence Blue Cross	Payroll Deduction	$ 104.00
Receipt For: ☐ Primary ☐ General	Occupation: Director		
☐ Other (specify):	Aggregate Year-to-Date > $ 208.00		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Isadore Beaman 221 Stoneway Lane Merion, Pa. 19066	Independence Blue Cross	Payroll Deduction	$ 130.00
Receipt For: ☐ Primary ☐ General	Occupation: Manager		
☐ Other (specify):	Aggregate Year-to-Date > $ 260.00		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Blount 5911 Doland Way Philadelphia, Pa. 19131	Independence Blue Cross	Payroll Deduction	$ 156.00
Receipt For: ☐ Primary ☐ General	Occupation: Senior Director		
☐ Other (specify):	Aggregate Year-to-Date > $ 308.00		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kimberly Borkowski 1101 Bromley Court Bensalem, Pa. 19020	Independence Blue Cross	Payroll Deduction	$ 104.00
Receipt For: ☐ Primary ☐ General	Occupation: Manager		
☐ Other (specify):	Aggregate Year-to-Date > $ 208.00		

SUBTOTAL of Receipts This Page (optional) ..... >	$	884.00
TOTAL This Period (last page this line number only) ..... >		

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 13 OF 21

FOR LINE NUMBER 11.a .i.

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NAME OF COMMITTEE (In Full)

> BlunPAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donna Boyer 113 Red Stone Ridge Delran, NJ 08075	Independence Blue Cross	Payroll Deduction	$ 150.00
Receipt For: ☐ Primary ☐ General	Occupation: Director		
☐ Other (specify):	Aggregate Year-to-Date > $ 282.00		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Yvette Bright 739 Westview Avenue Philadelphia, Pa 19118	Independence Blue Cross	Payroll Deduction	$ 116.00
Receipt For: ☐ Primary ☐ General	Occupation: Senior Director		
☐ Other (specify):	Aggregate Year-to-Date > $ 236.00		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charlotte Brooks 1393 Knox Drive Yardley, Pa 19067	Independence Blue Cross	Payroll Deduction	$ 130.00
Receipt For: ☐ Primary ☐ General	Occupation: Manager		
☐ Other (specify):	Aggregate Year-to-Date > $ 275.00		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sophia Bussa 286 Blair Mill Road Horsham, Pa 19044	Independence Blue Cross	Payroll Deduction	$ 110.00
Receipt For: ☐ Primary ☐ General	Occupation: Supervisor		
☐ Other (specify):	Aggregate Year-to-Date > $ 240.00		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Leo Carey 130 Mulberry Lane Media, Pa 19063	Independence Blue Cross	Payroll Deduction	$ 188.00
Receipt For: ☐ Primary ☐ General	Occupation: Manager		
☐ Other (specify):	Aggregate Year-to-Date > $ 298.00		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bonnie Ciocco 710 Duke Drive Wenonah, NJ 08090	Independence Blue Cross	Payroll Deduction	$ 130.00
Receipt For: ☐ Primary ☐ General	Occupation: Director		
☐ Other (specify):	Aggregate Year-to-Date > $ 260.00		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Albert Crawford 1417 Gentlemen's Way Dresher, Pa 19025	Independence Blue Cross	Payroll Deduction	$ 100.00
Receipt For: ☐ Primary ☐ General	Occupation: Chief Research Analyst		
☐ Other (specify):	Aggregate Year-to-Date > $ 230.00		

SUBTOTAL of Receipts This Page (optional)	>	$ 812.00
TOTAL This Period (last page this line number only)	>	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11.a .l.

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period
A. William Dobbins 1128 Fielding Drive West Chester, Pa. 19382 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 260.00		$ 130.00
B. Denise Dodd 112 East Madison Avenue Collingswood, NJ 08108 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Corp. Research Consultant Aggregate Year-to-Date > $ 208.00		$ 104.00
C. Barbara Dooney 310 Winding Way King of Prussia, Pa. 19406 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 260.00		$ 130.00
D. Richard Doran 316 S. Lawrence Street Philadelphia, Pa. 19106 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Vice President Aggregate Year-to-Date > $ 390.00		$ 195.00
E. Peter Duncan 322 Kent Road Gale Cynwyd, Pa. 19004 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Director Aggregate Year-to-Date > $ 260.00		$ 130.00
F. Karen Eskridge 114A East Providence Road Yeadon, Pa. 19050 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Senior Director Aggregate Year-to-Date > $ 208.00		$ 104.00
G. Franklin Foster 11 New Way Court Willingboro, NJ 08046 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Vice President Aggregate Year-to-Date > $ 390.00		$ 195.00

SUBTOTAL of Receipts This Page (optional) ..... > $ 988.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11.a .i.

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NAME OF COMMITTEE (in Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Neal Freedman 1500 Locust Street Philadelphia, Pa 19102 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Assoc. Actuary Aggregate Year-to-Date > $ 276.00	Payroll Deduction	$ 156.00
B. Nancy Cavarone 1433 Colonial Drive Boothwyn, Pa 19061 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Lead System Analyst Aggregate Year-to-Date > $ 202.00	Payroll Deduction	$ 104.00
C. Guru Ganesh 99 Running Drive Voorhees, NJ 08043 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Director Aggregate Year-to-Date > $ 260.00	Payroll Deduction	$ 130.00
D. Thomas Helme 604 Dolores Drive Broomall, Pa 19008 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 260.00	Payroll Deduction	$ 130.00
E. Anne Hughes 2538 Rosemont Avenue Ardmore, Pa 19003 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 238.00	Payroll Deduction	$ 120.00
F. Bertha Jackson 1 Buttonwood Street Philadelphia, Pa 19130 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Director Aggregate Year-to-Date > $ 208.00	Payroll Deduction	$ 104.00
G. Kathleen Jones 204 N. Merion Avenue Wenonah, NJ 08090 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Director Aggregate Year-to-Date > $ 208.00	Payroll Deduction	$ 104.00

SUBTOTAL	of Receipts This Page (optional) >	$ 848.00
TOTAL	This Period (last page this line number only) >	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)

BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Mary Jones 610 E. Vernon Road Philadelphia, Pa. 19119 Receipt For: Primary General Other (specify):	Independence Blue Cross Manager Aggregate Year-to-Date > $ 312.00	Payroll Deduction	$ 156.00
B. Henry Kearney 4019 K Street Philadelphia, Pa. 19124 Receipt For: Primary General Other (specify):	Independence Blue Cross Manager Aggregate Year-to-Date > $ 338.00	Payroll Deduction	$ 169.00
C. Katherine Keefe 319 Vassar Avenue Swarthmore, Pa. 19081 Receipt For: Primary General Other (specify):	Independence Blue Cross General Counsel Aggregate Year-to-Date > $ 312.00	Payroll Deduction	$ 156.00
D. Mary Kennedy P.O. Box 104 Chester Heights, Pa. 19017 Receipt For: Primary General Other (specify):	Independence Blue Cross Vice President Aggregate Year-to-Date > $ 316.00	Payroll Deduction	$ 156.00
E. Darlene Koezick 917 Park Avenue Collingswood, NJ 08108 Receipt For: Primary General Other (specify):	Independence Blue Cross Manager Aggregate Year-to-Date > $ 208.00	Payroll Deduction	$ 104.00
F. Daniel Lyons 5 Narothyn Road Sellersville, Pa. 18960 Receipt For: Primary General Other (specify):	Independence Blue Cross Vice President Aggregate Year-to-Date > $ 312.00	Payroll Deduction	$ 156.00
G. Kimberly Mann-Wise 7321 Drexel Road Philadelphia, Pa. 19151 Receipt For: Primary General Other (specify):	Independence Blue Cross Supervisor Aggregate Year-to-Date > $ 208.00	Payroll Deduction	$ 112.00

SUBTOTAL of Receipts This Page (optional) > $ 1,048.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Lorina Marshall 4000 Gypsy Lane Apt 701 Philadelphia, Pa 19144 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Vice President Aggregate Year-to-Date > $ 260.00	Payroll Deduction	$ 130.00
John Martines 36 Cooper Avenue Cherry Hill, NJ 08002 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 260.00	Payroll Deduction	$ 130.00
Liva Malani 8 Luis Drive Linwood, NJ 08221 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Director Aggregate Year-to-Date > $ 308.00	Payroll Deduction	$ 156.00
Kenneth Mayes 1122 Cynwyd Drive Berwyn, Pa 19312 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Vice President Aggregate Year-to-Date > $ 355.50	Payroll Deduction	$ 162.00
Robert Mayfield Jr. 231 Hedgemere Drive Devon, Pa 19333 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Vice President Aggregate Year-to-Date > $ 260.00	Payroll Deduction	$ 130.00
Joseph McGrath 8406 Cobden Road Laverock, Pa 19118 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Busn. Recovery Admin. Aggregate Year-to-Date > $ 260.00	Payroll Deduction	$ 130.00
Joseph McNally 1520 Argyle Road Berwyn, Pa 19312 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Director Aggregate Year-to-Date > $ 308.00	Payroll Deduction	$ 156.00

SUBTOTAL of Receipts This Page (optional) > $ 1,014.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Alfred Meyer 43 Todmorden Drive Wallingford, Pa 19086 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Independence Blue Cross Occupation: Senior Vice President Aggregate Year-to-Date > $ 390.00	Payroll Deduction	$ 195.00
B. Jay Mournead 14 Talley Court Wilmington, DE 19802 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Independence Blue Cross Occupation: Vice President Aggregate Year-to-Date > $ 210.00	Payroll Deduction	$ 15.00
C. Richard Nesser 605 Longchamps Drive Devon, Pa 19333 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Independence Blue Cross Occupation: President & COO, QCC Aggregate Year-to-Date > $ 260.00	Payroll Deduction	$ 130.00
D. Joan Olney 137-11 Kirkbridge Road Voorhees, NJ 08043 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Independence Blue Cross Occupation: Director Aggregate Year-to-Date > $ 208.00	Payroll Deduction	$ 104.00
E. Terry Pearce 312 William Salisbury Drive Downingtown, Pa 19335 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Independence Blue Cross Occupation: Director Aggregate Year to Date > $ 210.00	Payroll Deduction	$ 120.00
F. Vincent Pearson 108 Irick Road Mount Holly, NJ 08060 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Independence Blue Cross Occupation: Medical Director Aggregate Year-to-Date > $ 460.00	Payroll Deduction	$ 260.00
G. Jay Pearson 611 Guilford Road Cherry Hill, NJ 08003 Receipt For: ☐ Primary ☐ General ☐ Other (specify).	Independence Blue Cross Occupation: Senior Director Aggregate Year-to-Date > $ 260.00	Payroll Deduction	$ 130.00

SUBTOTAL of Receipts This Page (optional) > $ 954.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11.a .I.

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NAME OF COMMITTEE (In Full)

BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code Sara Picard 150 Fairway Drive Harleysville, Pa 19438	Name of Employer Independence Blue Cross Occupation Vice President	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 140.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 270.00		
B. Full Name, Mailing Address and ZIP Code Vincent Piccolo 14 Fisher Drive Clayton, NJ 08312	Name of Employer Independence Blue Cross Occupation Vice President	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 182.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 364.00		
C. Full Name, Mailing Address and ZIP Code R. Scott Post 265 Stormfield Drive Harleysville, Pa 19438	Name of Employer Independence Blue Cross Occupation Senior Director	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 156.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 306.00		
D. Full Name, Mailing Address and ZIP Code Bellye Pryor 820 North Preston Street Philadelphia, Pa 19104	Name of Employer Independence Blue Cross Occupation Cust. Service Rep.	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 130.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 260.00		
E. Full Name, Mailing Address and ZIP Code Stacy Higgins 717 W. Fisher Avenue Philadelphia, Pa 19120	Name of Employer Independence Blue Cross Occupation Retiree Consultant	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 130.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 242.00		
F. Full Name, Mailing Address and ZIP Code Thomas Rogers 833 Wice Avenue Drexel Hill, Pa 19026	Name of Employer Independence Blue Cross Occupation Manager	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 104.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 208.00		
G. Full Name, Mailing Address and ZIP Code Marc Rones 4 Marlindale Drive Voorhees, NJ 08043	Name of Employer Independence Blue Cross Occupation Manager	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 104.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 208.00		

SUBTOTAL of Receipts This Page (optional) . . . . . > $ 846.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11.a .i.

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Salvatore Russo 343 Yarnall Drive Springfield, Pa 19064 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Director Aggregate Year-to-Date > $ 254.00	Payroll Deduction	$ 130.00
B. Barbara Smith Cogshall 801 Quaker Lane Villanova, Pa 19085 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Director Aggregate Year to Date > $ 208.00	Payroll Deduction	$ 104.00
C. Marsha Spence 95 Tyler Drive Willingboro, NJ 08046 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Supervisor Aggregate Year-to-Date > $ 208.00	Payroll Deduction	$ 104.00
D. Hetty Slagg P.O. Box 292 Salisbury, Pa 19053 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Director Aggregate Year-to-Date > $ 260.00	Payroll Deduction	$ 130.00
E. Deborah Sucjanen 570 Lafayette Road Bryn Mawr, Pa 19010 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: General Council Aggregate Year-to-Date > $ 205.00	Payroll Deduction	$ 140.00
F. James Thomas 407 Westfield Drive Broomall, Pa 19008 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Senior Vice President Aggregate Year-to-Date > $ 260.00	Payroll Deduction	$ 130.00
G. Laura Tolles 1308 Roberts Way Voorhees, NJ 08043 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Busn. Analyst Aggregate Year-to-Date > $ 260.00	Payroll Deduction	$ 130.00

SUBTOTAL of Receipts This Page (optional) > $ 988.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11.a .i

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Mary Trucman 1525 Brian Drive West Chester, Pa 19380 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 230.00	Payroll Deduction	$ 130.00
Bruce Vandor Fix 1404 Emory Road Wilmington, DE 19803 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Vice President Aggregate Year-to-Date > $ 415.00	Payroll Deduction	$ 220.00
Katherine Watson 1931 Appaloosa Road Warrington, Pa 18976 Receipt For: Primary General Other (specify)	Independence Blue Cross Occupation: Director Aggregate Year-to-Date > $ 254.00	Payroll Deduction	$ 130.00
David Williams 1650 49th Street Pennsauken, NJ 08110 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 208.00	Payroll Deduction	$ 104.00
Peggy Shane 1510 Seton Villa Lane Wilmington, DE 19809 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 234.00	Payroll Deduction	$ 130.00
Margaret Kelly 243 Burgundy Lane Newtown, Pa 18940 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 270.00	10/26/95	$ 130.00
	Occupation Aggregate Year-to-Date > $		

SUBTOTAL	of Receipts This Page (optional) >	$ 844.00
TOTAL	This Period (last page this line number only) >	$ 29,653.00

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 21b

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NAME OF COMMITTEE (in Full)

> BluePAC Pennsylvania Blue Cross Blue PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dauphin Deposit Bank P.O. Box 2961 Harrisburg, Pa 17105	Check charge Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/14/05	$ 18 79
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) . . . . . >	$ 18 79
TOTAL This Period (last page this line number only) . . . . . >	$ 18 79

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 2
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NAME OF COMMITTEE (In Full)

BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CarePAC 1310 G Street, NW 12th Floor Washington, DC 20005	Contribution - PAC Disbursement for: Primary General Other (specify)	7/25/95 8/31/95 10/4/95	$ 3,000.00 $ 750.00 $ 1,000.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Phil Gramm for President P.O. Box 30119 Washington, DC 20033	Contribution - PAC Disbursement for: Primary General Other (specify)	7/10/95	$ 1,000.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Arlen Specter '96 1420 Walnut Street Pittsburgh, Pa 15218	Contribution - PAC Disbursement for: Primary General Other (specify)	9/13/95	$ 250.00
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Fox for Congress P.O. Box 632 Jenkintown, Pa 19046	Contribution - House Disbursement for: Primary General Other (specify)	12/5/95 12/11/95	$ 500.00 $ 250.00
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Coyne for Congress Committee P.O. Box 2426 Pittsburgh, Pa 15230	Contribution - House Disbursement for: Primary General Other (specify)	9/13/95 11/3/95 12/4/95	$ 1,000.00 $ 100.00 $ 750.00
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Murtha for Congress Committee P.O. Box 2707 Pittsburgh, Pa 15230	Contribution - House Disbursement for: Primary General Other (specify)	10/4/95	$ 500.00
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Santorum 2000 3000 Industrial Boulevard Bethel Park, Pa 15102	Contribution - Senate Disbursement for: Primary General Other (specify)	10/27/95	$ 250.00
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
People for English Committee 1234 Market Street Suite 1800 Philadelphia, Pa 19107	Contribution - House Disbursement for: Primary General Other (specify)	12/5/95	$ 250.00
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Fattah for Congress 1700 Market Street Suite 3650 Philadelphia, Pa 19103	Contribution - House Disbursement for: Primary General Other (specify)	11/22/95 12/14/95	$ 100.00 $ 250.00

SUBTOTAL of Disbursements This Page (optional)	$ 9,550.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2

FOR LINE NUMBE 2 3

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This P
Doyle for Congress Committee P.O. Box 17426 Pittsburgh, Pa 15235	Contribution House Disbursement for: Primary General Other (specify)	12/4/95	$ 2
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This P
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This P
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This P
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This P
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This P
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This P
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This P
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This P

SUBTOTAL of Disbursements This Page (optional) > $ 2

TOTAL This Period (last page this line number only) > $ 10,2

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 9

FOR LINE NUMBER 2 9

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Montgomery County Republican Comm. 625 N. Swede Street P.O. Box 590 Norristown Pa 19404	Contribution State Pa Disbursement for: Primary General Other (specify)	7/10/95 10/12/95 11/3/95	$1,000.00 $70.00 $2,000.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Republican State Committee 112 State Street Harrisburg, Pa 17101	Contribution State Pa Disbursement for: Primary General Other (specify)	7/10/95 10/4/95	$100.00 $250.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Change Allegheny 21st and Wharton Street Suite 317 Pittsburgh, Pa 15203	Contribution - State, Pa Disbursement for: Primary General Other (specify)	7/13/95 10/4/95 11/2/95	$1,000.00 $500.00 $500.00
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Bob Mellow 130 Seventh Street, Suite 1200 Pittsburgh, Pa 15222	Contribution - State, Pa Disbursement for: Primary General Other (specify)	7/21/95	$250.00
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Republican City Committee 17th and the Parkway Philadelphia, Pa 19103	Contribution State, Pa Disbursement for: Primary General Other (specify)	7/21/95 10/27/95	$150.00 $500.00
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Meehan for D.A. Committee 15th and Chestnut St Packard Building, 2nd Floor Philadelphia Pa 19102	Contribution - State, Pa Disbursement for: Primary General Other (specify)	8/1/95 10/12/95	$50.00 $1,000.00
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Sandy Miller P.O. Box 366 Washington Crossing, Pa 18977	Contribution - State, Pa Disbursement for: Primary General Other (specify)	8/1/95	$500.00
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Bob O'Connor 5870 Phillips Avenue Pittsburgh, Pa 15217	Contribution - State, Pa Disbursement for: Primary General Other (specify)	8/4/95	$100.00
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Citizens for Ron Klink P.O. Box 474 Jeanette, Pa 15644	Contribution State, Pa Disbursement for: Primary General Other (specify)	8/4/95	$350.00

SUBTOTAL of Disbursements This Page (optional) . . . . . > $8,320.00

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

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 2 9

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NAME OF COMMITTEE (in Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Senator Jubelirer Committee P.O. Box 2051 Altoona, Pa 16603	Contribution - State, Pa Disbursement for: Primary General Other (specify)	8/11/95	$300.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
People for Tom Druce 338 Glenbrook Way Chalfont, Pa 18914	Contribution - State, Pa Disbursement for Primary General Other (specify)	8/11/95	$250.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Senate Republican Campaign Comm. P.O. Box 792 Harrisburg, Pa 17108	Contribution - State, Pa Disbursement for: Primary General Other (specify)	8/18/95 10/27/95 11/3/95	$250.00 $500.00 $500.00
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Senator Richard A. Tilghman 406 Gascombe Lane Bryn Mawr, Pa 19010	Contribution - State, Pa Disbursement for: Primary General Other (specify)	8/31/95	$800.00
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Young Democrats of Allegheny County 340 East 12th Avenue Homestead, Pa 15120	Contribution - State, Pa Disbursement for: Primary General Other (specify)	9/13/95 10/27/95	$500.00 $100.00
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Fisher '96 Committee Two Chatham Center, 12th Floor Pittsburgh, Pa 15219	Contribution - State, Pa Disbursement for: Primary General Other (specify)	9/13/95 11/9/95 12/6/95 12/14/95	$1,000.00 $500.00 $500.00 $500.00
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Fernandez for Council 311 Spring Garden Street Philadelphia, Pa 19104	Contribution - State, Pa Disbursement for: Primary General Other (specify)	9/20/95	$250.00
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Frank Rizzo '95 Committee 1515 Locust Street, 7th Floor Philadelphia, Pa 19102	Contribution - State, Pa Disbursement for Primary General Other (specify)	9/20/95 11/3/95	$250.00 $250.00
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Salvatore for Senate 14219 Barcalow Street Philadelphia, Pa 19116	Contribution - State, Pa Disbursement for Primary General Other (specify)	9/20/95	$250.00

SUBTOTAL of Disbursements This Page (optional) > $6,500.00

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

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 2 9

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Re-elect Cornell Committee 255 East Montgomery Avenue Hatboro, Pa 19040	Contribution - State, Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/20/95	$300.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Bucks County Republican Committee 1250 Spencer Road Ivyland, Pa 18974	Contribution - State, Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/20/95 10/12/95	$100.00 $200.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Jeff Piccola P.O. Box 741 Harrisburg, Pa 17108	Contribution - State, Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/20/95	$250.00
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Barbara Hafer 900 East Cathedral Road Philadelphia, Pa 19106	Contribution - State Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/20/95	$500.00
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Longstreth for Philadelphia P.O. Box 28572 Philadelphia, Pa 15145	Contribution - State Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/20/95 10/4/95 10/27/95	$500.00 $500.00 $100.00
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Corcoran & Alberig P.O. Box 1497 Scranton, Pa 18501	Contribution - State Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/20/95	$100.00
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Rendell '95 7 North Columbus Blvd Pier 5, Number 225 Philadelphia, Pa 19106	Contribution State, Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/20/95	$100.00
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Lackawanna County Republican Comm. P.O. Box 904 Scranton, Pa 18503	Contribution State, Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	9/20/95	$120.00
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of John Perzel 1234 Market Street Philadelphia Pa 19101	Contribution - State, Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/4/95 11/3/1995	$250.00 $500.00

SUBTOTAL of Disbursements This Page (options) . . . . . >	$3,520.00
TOTAL This Period (last page this line number only) . . . . . >	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 2 9

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NAME OF COMMITTEE (In Full)

BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Friends of Fitzpatrick & Martin One Plymouth Meeting Plymouth Meeting, Pa 19462	Contribution - State Pa Disbursement for: Primary General Other (specify)	10/4/95	$250.00
B. Democratic St. Sen. Campaign Comm. P.O. Box 3792 Harrisburg, Pa 17105	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	10/4/95 10/27/95	$500.00 $500.00
C. House Republican Campaign Comm. P.O. Box 11787 Harrisburg, Pa 17108	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	10/4/95 10/4/95 11/9/95 11/22/95	$300.00 $300.00 $500.00 $1,000.00
D. Neighbors United to Elect Frank DiCicco 1208 Tasker Street, 2nd Floor Philadelphia, Pa 19148	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	10/4/95	$250.00
E. Committee to Re-Elect Joan Specter 626 Hazelhurst Avenue Philadelphia, Pa 19008	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	10/4/95	$100.00
F. Citizens for Joe Uliana P.O. Box 1977 Bethlehem, Pa 18016	Purpose of Disbursement Contribution - State Pa Disbursement for: Primary General Other (specify)	10/4/95	$250.00
G. Holl Senate Committee P.O. Box 1184 Lansdale Pa 19446	Purpose of Disbursement Contribution - State Pa Disbursement for: Primary General Other (specify)	10/4/95 10/12/95	$300.00 $300.00
H. Committee to Elect Pelrosky 2489 Jefferson Avenue Washington, Pa 15301	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	10/4/95	$400.00
I. Allegheny Co. Good Govt. Committee CNG Tower, 26th Floor Pittsburgh, Pa 15222	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	10/4/95 11/2/95 12/14/95	$500.00 $500.00 $700.00

SUBTOTAL of Disbursements This Page (options) ..... > $6,650.00

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

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 2 9

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NAME OF COMMITTEE (In Full)

BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Committee to Elect Jack Wagner 162 Ulysses Street Pittsburgh, Pa 15211	Contribution - State, Pa Disbursement for: Primary General Other (specify)	10/4/95	$ 250.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Allen Kukovich P.O. Box 97 Greensburg, Pa 15601	Contribution State, Pa Disbursement for: Primary General Other (specify)	10/4/95	$ 250.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Tim Holuer P.O. Box 8457 Reading, Pa 19603	Contribution State, Pa Disbursement for: Primary General Other (specify)	10/4/95	$ 300.00
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Delaware Co. Rep. Finance Committee Government Center Bldg., Room 221 Media, Pa 19063	Contribution - State Pa Disbursement for: Primary General Other (specify)	10/12/95	$ 800.00
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Thompson for Senate P.O. Box 792 Harrisburg, Pa 17108	Contribution State Pa Disbursement for: Primary General Other (specify)	10/12/95 10/27/95	$ 300.00 $ 100.00
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Senator Joe Loeper P.O. Box 155 Drexel Hill, Pa 19026	Contribution State, Pa Disbursement for: Primary General Other (specify)	10/12/95 10/27/95	$ 250.00 $ 250.00
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Citizens for Sarcione P.O. Box 266 Oxford, Pa 19363	Contribution - State, Pa Disbursement for: Primary General Other (specify)	10/12/95	$ 500.00
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
GPCC Penn PAC 1234 Market Street, Suite 1900 Philadelphia, Pa 19107	Contribution - State, Pa Disbursement for: Primary General Other (specify)	10/12/95	$ 500.00
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Augusta A. Clark 1925 South 21st Street Philadelphia, Pa 19145	Contribution - State, Pa Disbursement for: Primary General Other (specify)	10/12/95	$ 250.00

SUBTOTAL of Disbursements This Page (optional) $ 3,550.00

TOTAL This Period (last page this line number only)

SCHEDULE B — **ITEMIZED DISBURSEMENTS**

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

PAGE 8 OF 9

FOR LINE NUMBER 2.9

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Fight PAC P.O. Box 75862 Washington, DC 20015	Contribution - State, Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/20/95 10/27/95	$ 100.00 $ 500.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
House Democratic Campaign Comm P.O. Box 555, Federal Station Square Harrisburg, Pa 17108	Contribution - State, Pa Disbursement for ☐ Primary ☐ General ☐ Other (specify)	10/27/95	$ 500.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Committee to Elect Greg Fajt 451 South Meadowcroft Avenue Pittsburgh, Pa 15228	Contribution - State Pa Disbursement for ☐ Primary ☐ General ☐ Other (specify)	10/27/95	$ 350.00
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Anthony H. Williams P.O. Box 5313 Philadelphia, Pa 19139	Contribution - State Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/95 11/3/95	$ 125.00 $ 125.00
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Committee to Elect Rick Mariano for City Council P.O. Box 52172 Philadelphia Pa 19115	Contribution - State, Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/95	$ 250.00
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Newman for Supreme Court 100 Four Falls Corporate Center Suite 213 West Conshohocken, Pa 19428	Contribution - State, Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/95	$ 200.00
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Citizens for Judge Nigro 1208 Tasker Street Philadelphia, Pa 19148	Contribution - State, Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/95	$ 1,000.00
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Kenney for Council 1208 Tasker Street, 2nd Floor Philadelphia, Pa 19148	Contribution - State, Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/95	$ 350.00
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Brian O'Neill 2000 Market Street, 10th Floor Philadelphia, Pa 19103	Contribution - State, Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/95	$ 100.00

SUBTOTAL of Disbursements This Page (optional) ..... > $ 3,600.00

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

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 7 OF 9

FOR LINE NUMBER 2 9

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NAME OF COMMITTEE (in Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code Friends of John F Street The Bourse, Suite 514 Independence Mall East Philadelphia, Pa 19106	Purpose of Disbursement Contribution State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 10/27/95	Amount of Each Disbursement This Period $ 1,000.00
B. Full Name, Mailing Address and ZIP Code Friends of Marion B Tasco P.O. Box 27454 Philadelphia, Pa 19118	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 11/3/95	Amount of Each Disbursement This Period $ 250.00
C. Full Name, Mailing Address and ZIP Code Nutter for City Council P O Box 15506 Philadelphia, Pa 19121	Purpose of Disbursement Contribution State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 11/3/95	Amount of Each Disbursement This Period $ 500.00
D. Full Name, Mailing Address and ZIP Code Friends of Governor Tom Ridge Comm. 614 W. Front Street, Suite A Harrisburg, Pa 17101	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 11/9/95 11/9/95 11/9/95	Amount of Each Disbursement This Period $ 1,000.00 $ 500.00 $ 500.00
E. Full Name, Mailing Address and ZIP Code Pennsylvania Democratic Party 510 North Third Street Harrisburg, Pa 17101	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 11/9/95	Amount of Each Disbursement This Period $ 500 00
F. Full Name, Mailing Address and ZIP Code Friends of Senator Gene Punteriello 1225 South Main Street Suite 204 Greensburg, Pa 15601	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	Date (month, day, year) 11/9/95	Amount of Each Disbursement This Period $ 250 00
G. Full Name, Mailing Address and ZIP Code Republican Committee of Allegheny Co. 711 Penn Avenue, Suite 402 Pittsburgh, Pa 15222	Purpose of Disbursement Contribution - State Pa Disbursement for Primary General Other (specify)	Date (month, day, year) 11/9/95	Amount of Each Disbursement This Period $ 500.00
H. Full Name, Mailing Address and ZIP Code Casey for Auditor General Committee 116 Washington Avenue Suite 2A Scranton, Pa 18503	Purpose of Disbursement Contribution - State, Pa Disbursement for Primary General Other (specify)	Date (month, day, year) 11/9/95	Amount of Each Disbursement This Period $ 500.00
I. Full Name, Mailing Address and ZIP Code Republican Commonwealth Club 112 State Street Harrisburg, Pa 17101	Purpose of Disbursement Contribution - State Pa Disbursement for Primary General Other (specify)	Date (month, day, year) 12/5/95 12/6/95	Amount of Each Disbursement This Period $ 500 00 $ 1,500 00

SUBTOTAL of Disbursements This Page (optional) > $ 7,500 00

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

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 2.9

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Citizens for Hughes P.O. Box 13031 Philadelphia, Pa 19101	Contribution - State, Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/5/95	$ 500.00
B. Philadelphia Country Club 1601 Spring Mill Road Gladwyne, Pa 19035	Contribution - State Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/5/95	$ 1,086.24
C. Committee to Re-Elect John Taylor 2847 Almond Street Philadelphia Pa 19134	Contribution - State, Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/6/95 12/5/95	$ 500.00 $ 250.00
D. Miller for Auditor General P.O. Box 368 Washington Crossing Pa 18977	Contribution - State, Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/14/95	$ 500.00
E. Friends of Joe Pitts 905 Mitchell Farm Lane Kennett Square, Pa 19348	Contribution - State, Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/14/95	$ 50.00
F. Kenney/Taylor 510 Carol Street New Cumberland, Pa 17070	Contribution - State, Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/14/95	$ 300.00
G. Unitemized Contributions	Contribution - State, Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Various	$ 5,297.00
H. Citizens for Mike Fitzpatrick 115 North Broad Street, Suite 203 Doylestown, Pa 18901	Returned Contribution - State, Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8/13/95	$ (250.00)
I. Friends of Bob Mellow 130 7th Street, Suite 1200 Pittsburgh, Pa 15222	Returned Contribution - State, Pa Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7/21/95	$ (250.00)

SUBTOTAL of Disbursements This Page (optional) > $ 7,883.24

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

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 2 9

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Anthony H Williams P.O. Box 6318 Philadelphia, Pa 19139	Returned Contribution - State, Pa Disbursement for: Primary General Other (specify)	12/4/95	$ (125.00)
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Citizens for Sarcione P O Box 256 Oxford Pa 19363	Returned Contribution - State, Pa Disbursement for: Primary General Other (specify)	12/8/95	$ (500.00)
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: Primary General Other (specify)		
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: Primary General Other (specify)		
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: Primary General Other (specify)		
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: Primary General Other (specify)		
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: Primary General Other (specify)		
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: Primary General Other (specify)		
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: Primary General Other (specify)		

SUBTOTAL of Disbursements This Page (optional) > $ (625.00)

TOTAL This Period (last page this line number only) > $46,908.24

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☑	First Class Mail	POSTMARKED 1/23/96
☐	Registered/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

ZLT — PREPARER

1/25/96 — DATE PREPARED

FEC FORM 70-2 (12/92)

9 4 0 3 0 1 7 3 5 5 7