

RECEIVED
2012 JUN 15 AM 11:08
FEC MAIL CENTER

June 12, 2012

Federal Election Committee
999 E. Street, NW
Washington, DC 20463

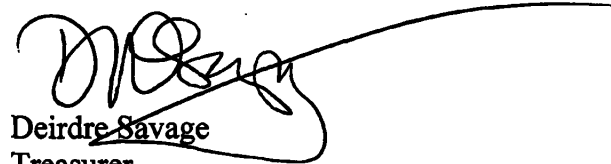
To Whom It May Concern:

Enclosed please find the "Statement of Organization" of Massachusetts Blue PAC.

If you have any questions or concerns, please do not hesitate to contact me directly at 617-246-3359 or at massachusettsbluepac@yahoo.com

Thank you.

Very truly yours,



Deirdre Savage
Treasurer
Massachusetts Blue PAC

12030822504

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED 2012 JUN 15 AM 11:08 FEC MAIL CENTER

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

MASSACHUSETTS BLUE PAC

ADDRESS (number and street)

401 PARK DRIVE

(Check if address is changed)

LANDMARK CENTER

BOSTON

MA

02215

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

massachusettsbluepac@yahoo.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

06/08/2012

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

NEW (N)

OR

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Deirdre Savage

Signature of Treasurer

[Handwritten Signature]

Date

06/08/2012

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

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 02/2009)

12030822505

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: House Senate President State District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative

In addition, this committee is a Lobbyist/Registrant PAC.

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number	<input type="checkbox"/>
2.	_____	FEC ID number	<input type="checkbox"/>
3.	_____	FEC ID number	<input type="checkbox"/>
4.	_____	FEC ID number	<input type="checkbox"/>

12030822506

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

BLUE CROSS BLUE SHIELD OF MASSACHUSETTS

Mailing Address

401 PARK DRIVE
LANDMARK CENTER
BOSTON MA 02215
CITY STATE ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

DEIRDRE SAVAGE

Mailing Address

401 PARK DRIVE
LANDMARK CENTER
BOSTON MA 02215
CITY STATE ZIP CODE

Title or Position

SR DIRECTOR

Telephone number

617-246-5000

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

DEIRDRE SAVAGE

Mailing Address

401 PARK DRIVE
LANDMARK CENTER
BOSTON MA 02215
CITY STATE ZIP CODE

Title or Position

DIRECTOR SR

Telephone number

617-246-5000

12030822507

Full Name of Designated Agent

MICHAEL KATZMAN

Mailing Address

401 PARK DRIVE

LANDMARK CENTER

BOSTON

CITY

MA

STATE

02215

ZIP CODE

Title or Position

DIRECTOR

Telephone number

617-246-5000

12030822508

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

BANK OF AMERICA

Mailing Address

525 WASHINGTON STREET

WEYMOUTH

CITY

MA

STATE

02188

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

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

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

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

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *Fed Ex* Shipping Date
6/14/12
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

[Signature]
 PREPARER
 (3/2005)

6/15/12
 DATE PREPARED

12030822509