2015 · 07 · NO · 08 · 00015510

FE7AN014

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED -FEC MAIL CENTER

2015 JUL 30 PM 3: 02

Office Use Only

1.	NAME O COMMIT	F TEE (in full)	TYPE OR PRIN	IT ♥	Example: If typower the lines.	ping, type	12FE4M:	5	
В	LŲE _I CR	OSS BLUE SHIE	LLD OF NE P	AC (BLUEPA	(G)			<u> </u>	
Ш	1 1 1								
	•	umber and street)	РО ВОХ 3	248					
ř	Che	ck if different		11111	1.1.1.1	<u> </u>			
		orted. (ACC)	LOMAHA	1 1 1 1 1	1 1 1 1 1		NE L	68124]-[]
2.	FEC IDI	ENTIFICATION NU	JMBER ▼	CITY	' A	s	TATE A	ZIP C	ODE A
	C 00	0276311		3. IS RE	THIS N	NEW (N) OR	AM (A)	ENDED	
4.	TYPE (Choose	OF REPORT One)	(b) Monthly Report Due On	LI	20 (M2)	May 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election Year Only)
	(a) Qua	rterly Reports:		Mar 2	20 (M3)	Jun 20 (M6)	Sep	20 (M9)	Dec 20 (M12) (Non-Election Year Only)
	П	April 15		Apr 2	20 (M4)	Jul 20 (M7)	Oct 2	20 (M10)	Jan 31 (YE)
	П	Quarterly Report (C July 15	(C) 12	-Day IE-Election	Primary (1	2P)	General (12G)	Runoff (12R)
	17 17	Quarterly Report (C October 15	Re	port for the:	Convention	n (12C)	Special (128)	
		Quarterly Report (C January 31 Year-End Report (Y		Election	ı on	/ BTB /	Y	in the State	
	×	July 31 Mid-Year Report (Non-election Year Only) (MY)	PC	-Day DST-Election	General (3	30G)	Runoff (3	OR)	Special (30S)
		Termination Report (TER)		port for the:	i on	/ 6 8 /	Y	in the State	B B
5.	Covering	Period 01	01	2015	through	06	30 /	2015	
l ce	ertify that	I have examined the	nis Beport and	to the best of i	my knowledge an	d belief it is true	e, correct and	i complete.	
Тур	e or Prin	Name of Treasure	Tatt	Te de	1.7	aurr	76		
Sig	nature of	Treasurer	wither	5	مسو	D.	ate 0.7	1 2 8	2015
NO	TE: Subm	ission of false, error	eous, or incomp	olete information	may subject the p	person signing th	is Report to the	ne penalties of	52 U.S.C. § 30109
	U	fice se nly						FEC FO Rev. 12	

	_	FEC Form 3X (Rev. 02/2003)	OF R		ARY PAGE AND DISBURSEMENTS	s			Page 2
v	Vrite (or Type Committee Name							
_	BL	UE CROSS BLUE SHIELD OF N	NE PAC	(BLUEPA	.C)				
F	Report	Covering the Period: From:	м м 01	/ 01 υ	2015	То:	06	30	2015
					COLUMN A This Period			COLUMN ndar Year-	
6.	(a)	Cash on Hand January 1, 2015				[28,046.46
	(b)	Cash on Hand at Beginning of Reporting Period	[1 1 42	, 28,046.46				
	(c)	Total Receipts (from Line 19)		• • •	n 15,945-39		-1	43.	15,845,39,
	(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	[Δ	n 43,99 <u>1-85</u>		D		43,991.85.
7.	Tota	al Disbursements (from Line 31)	. [4	17,910.86			4 4 7	17,910.86
8.	Rep	sh on Hand at Close of porting Period btract Line 7 from Line 6(d))	[# . H . 47\.	26,080.99				26,080.99,
9.	the	ots and Obligations Owed TO Committee (Itemize all on nedule C and/or Schedule D)	- [A 473.	1				
10	the	ots and Obligations Owed BY Committee (Itemize all on nedule C and/or Schedule D)	[
]	This committee has qualified as a mu	ulticandid	ate commit	tee. (see FEC FORM	1M)			
			For	further i	nformation contact	t:			
			Fe	999 E	ection Commission E Street, NW pton, DC 20463				
					e 800-424-9530 202-694-1100				

FE6AN026

DETAILED SUMMARY PAGE

	FEC Form 3X (Rev. 06/2004)	of Receipts	Page 3
Wi	rite or Type Committee Name		· · · · · · · · · · · · · · · · · · ·
	BLUE CROSS BLUE SHIELD OF NE PA	AC (BLUEPAC)	
_	N · M	, D&B , VXVXVXV	WAR 1 DED 1 ARALAN
Re	eport Covering the Period: From: 01	01, 2015, To	ro: 06 30 2015,
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)		7,594.97 7,15,945.39
12.	(b) Political Party Committees	15,945,39	15,945,39
13.	All Loans Received		
	Loan Repayments Received Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16.	(Carry Totals to Line 37, page 5)		
	Other Federal Receipts (Dividends, Interest, etc.)		
18.	Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)		
	(b) Levin Funds (from Schedule H5)		
	(c) Total Transfers (add 18(a) and 18(b))		
19.	. Total Receipts (add Lines 11(d),	· · · · · · · · · · · · · · · · · · ·	
	12, 13, 14, 15, 16, 17, and 18(c))▶	15,945.39	15,945.39
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	15 945.39	15 945 39

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

COLUMN A **COLUMN B** II. Disbursements **Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) Federal Share (ii) Non-Federal Share..... (b) Other Federal Operating Expenditures (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶ 117.36 22. Transfers to Affiliated/Other Party 7,000,00 Committees..... 7,000,00 Contributions to Federal Candidates/Committees and Other Political Committees. 24. Independent Expenditures 26. Loan Repayments Made..... 27. Loans Made...... 28. Refunds of Conti Refunds of Contributions To:
(a) Individuals/Persons Other
Than Political Committees (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..........▶ 293,50 29. Other Disbursements 1,000,00 1,000,00 30. Federal Election Activity (52 U.S.C. § 30101(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share (ii) "Levin" Share..... (b) Federal Election Activity Paid Entirely With Federal Funds (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....▶ 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))... 1,7,9,10,.86 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 **COLUMN A** III. Net Contributions/Operating Ex-**COLUMN B Total This Period** penditures Calendar Year-to-Date 33. Total Contributions (other than loans) (from Line 11(d), page 3) 15,945.39 34. Total Contribution Refunds (from Line 28(d)) <u> 293.50</u> 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) 5,651,89 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 1 OF 6 (check only one) X 11a
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full) BLUE CROSS BLUE SHIELD OF NE PA	ne and address of any political committee	
Omaha FEC ID number of contributing federal political committee. Name of Employer Blue Cross Blue Shield of NE Receipt For: Primary General Other (specify) ▼	State Zip Code IE 68124-2767 Coupation EEO ggregate Year-to-Date ▼	Date of Receipt 06 30 2015 Amount of Each Receipt this Period 2,439.84
Omaha FEC ID number of contributing federal political committee. Name of Employer Blue Cross Blue Shield of NE Parish For:	State Zip Code NE 68022-1823 Coupation President agregate Year-to-Date ▼	Date of Receipt 0,6 3,0 2,0,1,5 Amount of Each Receipt this Period
Council Bluffs FEC ID number of contributing federal political committee. Name of Employer Blue Cross Blue Shield of NE	State Zip Code IA 51503-7830 Coupation EVP Strategy Innovation ggregate Year-to-Date 731.08	Date of Receipt 0.6 / 3.0 / 2.0.1.5 Amount of Each Receipt this Period 731.08
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only		3,946.13

SCHEDULE	Α	(FEC	Form	3X)
ITEMIZED F	REC	EIPTS	,	

FOR LINE NUMBER: PAGE 2 OF 6 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 **Detailed Summary Page** Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC) Full Name (Last, First, Middle Initial) A. Kolli, Rama, K Date of Receipt Mailing Address 2015 06 3.0 2723 N. 191st Street City State Zip Code Elkhorn NE 68022-2909 Amount of Each Receipt this Period FEC ID number of contributing 593,45 federal political committee. Name of Employer Occupation Blue Cross Blue Shield of NE **VP Information Services CIO** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 593,45 Full Name (Last, First, Middle Initial) Date of Receipt B. Twohig, Gretchen, L. Mailing Address 201 06 18676 Oregon Circle City State Zip Code NE 68022-3945 Elkhorn Amount of Each Receipt this Period FEC ID number of contributing 454.50 federal political committee. Name of Employer Occupation Blue Cross Blue Shield of NE Assoc General Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 454,50 Full Name (Last, First, Middle Initial) Date of Receipt Byers, Gerald Mailing Address 128 Allison Ave City State Zip Code Papillion NE 68133-4426 Amount of Each Receipt this Period FEC ID number of contributing 443.74 federal political committee. Name of Employer Occupation Blue Cross Blue Shield of NE SVP and CFO Receipt For: Aggregate Year-to-Date ▼ Primary General 443.74 Other (specify) w 1491.69 SUBTOTAL of Receipts This Page (optional).....

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

SCHEDULE A	(FEC	Form	3X)
ITEMIZED RE	CEIPTS	;	

CHEDITE A JEEC Earm 2V				
SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 3 OF 6		
TEMIZED RECEIPTS	for each category of the	(check only one)		
	Detailed Summary Page	X 11a 11b 11c 12		
		13 14 15 16 17		
Any information copied from such Reports and St				
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)				
angle BLUE CROSS BLUE SHIELD OF NE	PAC (BLUEPAC)			
<u> </u>	- \			
Full Name (Last, First, Middle Initial)				
A. Handke, Lee, J		Date of Receipt		
Mailing Address		MART / DED / CALSARA		
5603 N 160th Ave		06 30 2015		
City	State Zip Code			
Omaha	NE 68116-3624	Amount of Each Receipt this Period		
FEC ID number of contributing				
federal political committee.		408.52		
·				
Name of Employer	Occupation			
Blue Cross Blue Shield of NE	SVP Providers & Products			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General		1		
Other (specify) ▼	408,52			
Full Name (Last, First, Middle Initial)				
3. Courtney, Susan		Date of Receipt		
Mailing Address		MAN / DEDI / PARAMAN		
1711 N. 171st Street		06 30 2015		
City	State Zip Code			
Omaha	NE 68118-2807	Amount of Each Receipt this Period		
FEC ID number of contributing				
federal political committee.	C	387.79		
·				
Name of Employer	Occupation			
Blue Cross Blue Shield of NE	SVP Tech & Operations			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General				
Other (specify) ▼	387,79			
Full Name (Last, First, Middle Initial)				
C. Richardson, Jennifer		Date of Receipt		
Mailing Address_		Many / Gard / Landadada		
601 Skyline Drive		06 3 0 2 0 1 5		
City	State Zip Code			
Elkhorn	NE 68022-1716	Amount of Each Receipt this Period		
FEC ID number of contributing				
federal political committee.		358.41		
Name of Employer	Occupation			
	'			
Blue Cross Blue Shield of NE	SVP Operations			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General		1		
Other (specify) 🔻	358.41]		
		4 454 70		
SUBTOTAL of Receipts This Page (optional)	······	1,154.72		
TOTAL This Period (last page this line number.	only)	1		

SCHEDULI	ΕA	(FEC	Form	3X)
ITEMIZED	REC	EIPTS	}	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate sche for each category	of the
	Detailed Summary	7 Page 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or use name and address of any politica	d by any person for the purpose of soliciting contributions al committee to solicit contributions from such committee.
BLUE CROSS BLUE SHIELD OF NE	PAC (BLUEPAC)	
Full Name (Last, First, Middle Initial) A. Whitson, Janet Mailing Address		Date of Receipt
420 Golden Oaks Drive	Charles Zin Condo	0 6 3 0 2 0 1 5
City Council Bluffs	State Zip Code IA 51503-8640	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	330,00
Name of Employer Blue Cross Blue Shield of NE Receipt For:	Occupation SVP Special Projects PT Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼		330.00
Full Name (Last, First, Middle Initial) B. Schaefer-Haines, Joann, E		Date of Receipt
Mailing Address 15861 Seward Street City	State Zip Code	06 / 3 0 / 2 0 1 5
Omaha	NE 68118-2335	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250,55
Name of Employer Blue Cross Blue Shield of NE	Occupation SVP and CMO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼		250,55
Full Name (Last, First, Middle Initial) C. Alm, Daniel, W		Date of Receipt
Mailing Address 5071 S. 175th Street	State 7:- Code	0 6 3 0 2 0 1 5
City Omaha	State Zip Code NE 68135-3457	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	246,65
Name of Employer Blue Cross Blue Shield of NE	Occupation VP Actuarial Underwriting	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	246,65
SUBTOTAL of Receipts This Page (optional)		827.20
TOTAL This Period (last page this line number	only)	

SCHEDUL	EA	(FEC	Form	3X)
ITEMIZED	REC	EIPTS	,	

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 5 OF 6 (check only one)
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam		
NAME OF COMMITTEE (IN Full) BLUE CROSS BLUE SHIELD OF NE PA	C (BLUEPAC)	
Omaha FEC ID number of contributing federal political committee. Name of Employer Blue Cross Blue Shield of NE Receipt For: Primary General	State Zip Code NE 68136-1059 cupation Compliance & Ethics gregate Year-to-Date ▼	Date of Receipt O 6 7 3 0 7 2 0 1 5 Amount of Each Receipt this Period 246,14
Omaha FEC ID number of contributing federal political committee. Name of Employer Blue Cross Blue Shield of NE SV	State Zip Code NE 68164-4248 cupation P Sales & Account Svs gregate Year-to-Date	Date of Receipt 0 6 7 3 0 7 2 0 1 5 Amount of Each Receipt this Period 244,03
Primary General Other (specify) ▼	244.03	
Papillion FEC ID number of contributing federal political committee. Name of Employer Blue Cross Blue Shield of NE Paparit For:	State Zip Code NE 68133-3376 Coupation VP Administration Igregate Year-to-Date 232,12	Date of Receipt O 6 ' 3 0 ' 2 0 1 5 Amount of Each Receipt this Period 232.12
SUBTOTAL of Receipts This Page (optional)		722.29
TOTAL This Period (last page this line number only)		

SCHEDUL	E A	(FEC	Form	3X)
ITEMIZED	REC	EIPTS	;	

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 OF 6 (check only one)
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Staten or for commercial purposes, other than using the name		person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
BLUE CROSS BLUE SHIELD OF NE PA	C (BLUEPAC)	
Full Name (Last, First, Middle Initial) Anderson, David, M		Date of Receipt
Mailing Address 6223 S. 118th Plaza		06 30 2015
	State Zip Code	النسنة لنا النا
Omaha	NE 68137-4402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		208.39
Name of Employer Oc	cupation	-
Pagaint For:	P Finance Treasurer CAO	
Primary General	ggregate Year-to-Date ▼	_
Other (specify) ▼	208.39	1
Full Name (Last, First, Middle Initial)		Data of Bassist
Mailing Address		Date of Receipt
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		
Name of Employer Oc	ccupation	
	ggregate Year-to-Date ▼	
Primary General Other (specify) ▼		٦
	<u> </u>	4
Full Name (Last, First, Middle Initial) 2.		Date of Receipt
Mailing Address		M = M / 0 = 0 / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		The state of the s
Name of Employer O	ccupation	
	ggregate Year-to-Date ▼	
Primary General Other (specify) ▼		
SUBTOTAL of Receipts This Page (optional)		208.39
TOTAL This Period (last page this line number only)	8,350.42

SCHEDULE B (FEC Form 3X)	11	FOR LINE NUMBER: PAGE 1 OF	5
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)	۔ عود
	Detailed Summary Page	21b 22 x 23 24 25 27 28a 28b 28c 29	26 30b
Any information copied from such Reports and Statem	ents may not be sold or used	d by any person for the purpose of soliciting contribution	
or for commercial purposes, other than using the nam		I committee to solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)			
BLUE CROSS BLUE SHIELD OF NE PA	AC (BLUEPAC)		
Full Name (Last, First, Middle Initial)		Date of Dishurament	
Fortenberry, Jeff		Date of Disbursement	
Mailing Address PO Box 30265		02 01 2015	
	State Zip Code		
Lincoln Purpose of Disbursement	NE 68503		
·		0 1 1 Amount of Each Disbursement this Peri	iod
Candidate Name		Category/	
Jeff Fortenberry for United States Congres Office Sought: House Disbursen		Type (1) 1,000.00	ڵٮ
	Primary General		
President	Other (specify) ▼		
State: NE District:			
Full Name (Last, First, Middle Initial) B.		Date of Disbursement	
Fischer, Deb		BEN / DED / VEVEYOR	ĭ
Mailing Address PO Box 83287		02 09 2015	
	State Zip Code		
Lincoln Purpose of Disbursement	NE 68501		
	f	0 1 1 Amount of Each Disbursement this Per	iod
Candidate Name		Category/ 5,000.00	
Senator Fischer Office Sought: House Disbursen	nent For	Type 0,000.00	
x Senate	Primary General		
President	Other (specify) ▼		
State: NE District:			
Full Name (Last, First, Middle Initial) C.		Date of Disbursement	
Smith, Adrian		MAM / BAS / AAAAA	1
Mailing Address		0 2 1 8 2 0 1 5	
3321 Avenue I, Suite 6	State Zip Code		
,	NE 69361		
Purpose of Disbursement	r	0 1 1 Amount of Each Dichurcement this Box	
Candidate Name	L	Amount of Each Disbursement this Pen	iod
Adrian Smith for Congress		Category/ Type 1,000.00	
Office Sought: House Disburser		Comment Commen	3
Senate	Primary General Other (specify) ▼		
State: NE District:	Other (openity)		
SUBTOTAL of Disbursements This Page (optional)		7,000.00	
The state of the s			
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE N		PAGE 2 OF 5
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b	22 X 23	24 25 26
	· · · · · ·	27	28a 28b	28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
BLUE CROSS BLUE SHIELD OF NE PA	AC (BLUEPAC)			
Full Name (Last, First, Middle Initial)			Data of Dishurasi	
A. Fortenberry, Jeff			Date of Disburser	nent
Mailing Address			06 1	2 0 1 5
PO Box 30265	itate Zip Code			
	E 68503			
Purpose of Disbursement				
Candidate Name		011	Amount of Each	Disbursement this Period
Jeff Fortenberry for US Congress		Category/ Type		2,500,00
Office Sought: House Disbursen	nent For:	- 7,7-	2	<i>,</i>
	Primary General			
State: NE President District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
В.			Date of Disburse	ment
Mailing Address			M M / B W	0 / * * * * * * * * * * * * * * * * * *
Mailing Address			لسما لسم	
City	State Zip Code			-
Purpose of Disbursement				
			Amount of Each	Disbursement this Period
Candidate Name	-	Category/ Type		2 (II) 1
Office Sought: House Disbursen	nent For:	.,,,,,		· · · · · · · · · · · · · · · · · · ·
	Primary General			
President State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				· · · · · · · · · · · · · · · · · · ·
C.			Date of Disburse	ment
Mailing Address			Man / Pr	9 / ******
maining / iddition				
City	State Zip Code			
Purpose of Disbursement				
Candidate Name			Amount of Each	Disbursement this Period
Candidate Name		Category/ Type	, , , , , , , , , , , , , , , , , , ,	
Office Sought: House Disburser	nent For:	1,700		أسمدستسدمهم
Senate	Primary General			
President State: District:	Other (specify) ▼			
SUBTOTAL of Disbursements This Page (optional)				. 2,500،00ء
TOTAL This Period (last page this line number only)	· ·		V V V	
TOTAL THIS I CHOO TIGGE Page this line number offly)	······································			

SCHEDULE B (FEC Form 3X)	······································	FOR LINE N	UMBER: PAGE 3 OF 5
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only o	one)
	Detailed Summary Page		X 22 23 24 25 26
And information and it for a set 5		27	28a 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	, , ,		
BLUE CROSS BLUE SHIELD OF NE PA	C (BLUEPAC)		
Full Name (Last, First, Middle Initial)		*	
A. BLUE PAC			Date of Disbursement
Mailing Address		——	61° / 6° 9° / 2° 6° 1′ 5°
1310 G Street, NW 12th Floor			
City	state Zip Code		
Washington E Purpose of Disbursement	OC 20005		
, aspect of Dispulsement	r	0 0 8	Amount of Each Disbursement this Period
Candidate Name		Category/	
Transfer		Type	7,000.00
Office Sought: House Disbursem			
	Primary General Other (specify) ▼		
State: NE District:	- x.c. (apaon)/ ▼		
Full Name (Last, First, Middle Initial)			
В.			Date of Disbursement
Mailing Address			<u> </u>
Mailing Address			
City	State Zip Code		
Purpose of Disbursement	250		
			Amount of Each Disbursement this Period
Candidate Name		Category/	
Office Sought: House Disbursen		Туре	
	Primary General		
	Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial)			Data of District
C.			Date of Disbursement
Mailing Address			M M / O D / P Y Y Y Y
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Annachman Branchenad Banachman Caracle
City	State Zip Code	T	
Purpose of Disbursement	-		
<u> </u>			Amount of Each Disbursement this Period
Candidate Name		Category/	
Office Sought: House Disbursen		Туре	
_ 	Primary General		
	Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional)		.	7,000.00
TOTAL This Period (last page this line number only)			
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$SCHEDULE\;B\;\;(FEC\;Form\;3X)$		FOR LINE N	JUMBER: PAG	E 4 OF 4
TEMIZED DISBURSEMENTS	Use separate schedule(s)	e(s) (check only one)		
	for each category of the Detailed Summary Page	21b	22 23 24	25 26
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or for commercial purposes, other than using the name	e and address of any political	committee to	solicit contributions from such	committee.
NAME OF COMMITTEE (In Full)				
BLUE CROSS BLUE SHIELD OF NE PA	C (BLUEPAC)	<i>;</i>		
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE N	
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NAME OF COMMITTEE (In Full)			
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BRIDGING THE GAP PAC			MAM / DAD / YAYAYAY
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	itate Zip Code		
Omaha Purpose of Disbursement	NE 68144		
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING December 1. The FEC added this page to the end of this filing to indicate how	
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Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
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PREPARÉR (3/2015)	DATE PREPARED