

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

EmblemHealth Services Company LLC Federal PAC (aka EmblemHealth PAC)

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="2014.51"/>	<input type="text" value="2014.51"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="24539.12"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="5299.63"/>	<input type="text" value="39324.24"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="29838.75"/>	<input type="text" value="41338.75"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="0.00"/>	<input type="text" value="11500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="29838.75"/>	<input type="text" value="29838.75"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

EmblemHealth Services Company LLC Federal PAC (aka EmblemHealth PAC)

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4533.56	30442.53
(ii) Unitemized	766.07	8881.71
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5299.63	39324.24
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	5299.63	39324.24
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	5299.63	39324.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5299.63	39324.24

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	11500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	11500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	11500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	5299.63	39324.24
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5299.63	39324.24
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 11
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
EmblemHealth Services Company LLC Federal PAC (aka EmblemHealth PAC)

Full Name (Last, First, Middle Initial)
A. Anthony Angi

Mailing Address 367 Smith Road

City Yorktown Heights State NY Zip Code 10598

FEC ID number of contributing federal political committee. **C**

Name of Employer Emblem Health Services Co. Inc Occupation Director - Budget and Costs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **249.90**

Date of Receipt **12 / 31 / 2012**

Transaction ID : SA11AI.5509

Amount of Each Receipt this Period **99.96**

Payroll deduction - 6 pay periods @ \$16.66 per pay period

Full Name (Last, First, Middle Initial)
B. Richard G Beck

Mailing Address 333 E. 90th St. Apt. 5H

City New York State NY Zip Code 10128

FEC ID number of contributing federal political committee. **C**

Name of Employer HIP Health Plan of NY Occupation Communications Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **12 / 31 / 2012**

Transaction ID : SA11AI.5510

Amount of Each Receipt this Period **107.12**

Payroll deduction - 5 pay periods @ \$17.86 per pay period and 1 at \$17.82

Full Name (Last, First, Middle Initial)
C. Arthur J. Byrd

Mailing Address 55 Water St. 13th Floor

City New York State NY Zip Code 10041

FEC ID number of contributing federal political committee. **C**

Name of Employer HIP Health Plan of New York Occupation VP - Treasurer and Investor Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **12 / 31 / 2012**

Transaction ID : SA11AI.5511

Amount of Each Receipt this Period **666.64**

Payroll deduction - 5 pay periods @ \$111.12 per pay period and 1 at \$111.04

SUBTOTAL of Receipts This Page (optional)..... **873.72**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 11
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EmblemHealth Services Company LLC Federal PAC (aka EmblemHealth PAC)

Full Name (Last, First, Middle Initial)
A. Philip Gillich

Mailing Address 56 Jane St.

City State Zip Code
New York NY 10014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EmblemHealth Services Co., Inc VP Health Care Administration

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
749.92

Date of Receipt
12 / 31 / 2012
Transaction ID : SA11AI.5515

Amount of Each Receipt this Period
281.22

Payroll deduction - 6 pay periods @ \$46.87 per pay period

Full Name (Last, First, Middle Initial)
B. George Gonzalez

Mailing Address 35 Mimi Rd.

City State Zip Code
Old Bridge NJ 08857

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EmblemHealth Services Co., Inc Sr. Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
12 / 31 / 2012
Transaction ID : SA11AI.5516

Amount of Each Receipt this Period
150.00

Payroll deduction - 6 pay periods @ \$25 per pay period

Full Name (Last, First, Middle Initial)
C. Richard Gross

Mailing Address 14 grey Hollow Rd.

City State Zip Code
Norwalk CT 06850

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EmblemHealth services co., Inc Sales / Account Mgm't

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
749.92

Date of Receipt
12 / 31 / 2012
Transaction ID : SA11AI.5517

Amount of Each Receipt this Period
281.22

Payroll deduction - 6 pay periods @ \$46.87 per pay period

SUBTOTAL of Receipts This Page (optional)..... **712.44**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 11
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EmblemHealth Services Company LLC Federal PAC (aka EmblemHealth PAC)

Full Name (Last, First, Middle Initial)
A. William Lamoreaux

Mailing Address 104 Kings Wood Dr.

City Avon State CT Zip Code 06001

FEC ID number of contributing federal political committee. **C**

Name of Employer EmblemHealth Services Co., Inc Occupation Health Insurance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **999.96**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2012
Transaction ID : SA11AI.5519

Amount of Each Receipt this Period
461.52

Payroll deduction - 6 pay periods @ \$76.92 per pay period

Full Name (Last, First, Middle Initial)
B. Williams G. Lewis

Mailing Address 300 E. 25th St.
Apt 5D

City New York State NY Zip Code 10021

FEC ID number of contributing federal political committee. **C**

Name of Employer Health Insurance Plan of NY Occupation Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **749.92**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2012
Transaction ID : SA11AI.5521

Amount of Each Receipt this Period
281.22

Payroll deduction - 6 pay periods @ \$46.87 per pay period

Full Name (Last, First, Middle Initial)
c. Charlene Maher

Mailing Address 10 Liberty St.
#21F

City New York State NY Zip Code 10005

FEC ID number of contributing federal political committee. **C**

Name of Employer EmblemHealth Services Co., Inc Occupation Chief Marketing Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2012
Transaction ID : SA11AI.5522

Amount of Each Receipt this Period
375.00

Payroll deduction - 6 pay periods @ \$62.50 per pay period

SUBTOTAL of Receipts This Page (optional).....▶	1117.74
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 11
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EmblemHealth Services Company LLC Federal PAC (aka EmblemHealth PAC)

A. Edward Mailander
Full Name (Last, First, Middle Initial)
Mailing Address 148 Bayside Drive
City Atlantic Highlands State NJ Zip Code 07716
FEC ID number of contributing federal political committee. **C**
Name of Employer EmblemHealth Services Co., Inc Occupation Actuary
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 31 / 2012
Transaction ID : SA11AI.5523
Amount of Each Receipt this Period 545.45
Payroll deduction - 5 pay periods @ \$90.91 per pay period and 1 at \$90.90

B. Jane McCord
Full Name (Last, First, Middle Initial)
Mailing Address 308 Evergreen Ave.
City Bradley Beach State NJ Zip Code 07720
FEC ID number of contributing federal political committee. **C**
Name of Employer EmblemHealth Services Co., Inc Occupation Sr. Director - Communications
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 399.70

Date of Receipt 12 / 31 / 2012
Transaction ID : SA11AI.5524
Amount of Each Receipt this Period 218.15
Payroll deduction - 5 pay periods @ \$36.37 per pay period and 1 at \$36.30

C. James Meidlinger
Full Name (Last, First, Middle Initial)
Mailing Address 6542 Scotsville Rd.
City Floyds Knobs State IN Zip Code 47119
FEC ID number of contributing federal political committee. **C**
Name of Employer EmblemHealth Services Co., Inc Occupation Actuary
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 31 / 2012
Transaction ID : SA11AI.5525
Amount of Each Receipt this Period 107.12
Payroll deduction - 5 pay periods @ \$17.86 per pay period and 1 at \$17.82

SUBTOTAL of Receipts This Page (optional).....▶	870.72
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 11
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
EmblemHealth Services Company LLC Federal PAC (aka EmblemHealth PAC)

A. Himanshu Shah
Full Name (Last, First, Middle Initial)
Mailing Address 58 Canton Rd.
City Parsippany State NJ Zip Code 07054
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
HIP Health Plan of New York Managing Director - Bus. Development
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt
12 / 31 / 2012
Transaction ID : **SA11AI.5527**
Amount of Each Receipt this Period
218.15
Payroll deduction - 5 pay periods @ \$36.37 and 1 at \$36.30

B. Nena Tahil
Full Name (Last, First, Middle Initial)
Mailing Address 400 9th St.
Apt W56
City Hoboken State NJ Zip Code 07030
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
HIP Health Administration
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt
12 / 31 / 2012
Transaction ID : **SA11AI.5528**
Amount of Each Receipt this Period
199.96
Payroll deduction - 5 pay periods @ \$33.34 per pay period and 1 at \$33.26

C. Jennifer Truscott
Full Name (Last, First, Middle Initial)
Mailing Address 119 South Rd.
City Westhampton State NY Zip Code 11977
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Emblemhealth Services Co., Inc Health Care Executive
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
749.92

Date of Receipt
12 / 31 / 2012
Transaction ID : **SA11AI.5529**
Amount of Each Receipt this Period
281.22
Payroll deduction - 6 pay periods @ \$46.87 per pay period

SUBTOTAL of Receipts This Page (optional).....▶	699.33
TOTAL This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)
EmblemHealth Services Company LLC Federal PAC (aka EmblemHealth PAC)

A. Elizabeth Weinstock
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 Fields Ave.
 City Staten Island State NY Zip Code 10314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EmblemHealth Services Co., Inc Occupation Information Technology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **12 / 31 / 2012**
Transaction ID : SA11AI.5532
 Amount of Each Receipt this Period **75.00**
 Payroll deduction - 6 pay periods @ \$25 per pay period

B. Caroline Yap
 Full Name (Last, First, Middle Initial)
 Mailing Address 270 Feronia Way
 City Rutherford State NJ Zip Code 07070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Emblemhealth Services Co., Inc Occupation Senior Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **12 / 31 / 2012**
Transaction ID : SA11AI.5534
 Amount of Each Receipt this Period **184.61**
 Payroll deduction - 5 pay periods @ \$30.77 per pay period and 1 at \$30.76

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	259.61
TOTAL This Period (last page this line number only).....▶	4533.56