

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

ADDRESS (number and street) P.O. Box 2291
 Check if different than previously reported. (ACC)
Durham NC 27702

2. **FEC IDENTIFICATION NUMBER** C00312223
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(d) 30-Day **Post**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 11 23 2010 through 12 31 2010

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 Kenneth Wright

Signature of Treasurer Electronically Filed by Kenneth Wright Date 03 28 2011

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

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		84952.63
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	6107.69									
(c) Total Receipts (from Line 19)	11808.26	99513.32								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	17915.95	184465.95								
7. Total Disbursements (from Line 31)	0.00	166550.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	17915.95	17915.95								
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									

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**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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)	11018.98	79471.53
(ii) Unitemized	789.28	20041.79
(iii) TOTAL (add Lines 11(a)(i) and (ii)	11808.26	99513.32
(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)	11808.26	99513.32
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 Transfer (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))	11808.26	99513.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	11808.26	99513.32

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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	18500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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	-750.00
(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	-750.00
29. Other Disbursements.....	0.00	148800.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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	166550.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	166550.00

DETAILED SUMMARY PAGE
of Disbursements

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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	11808.26	99513.32
34. Total Contribution Refunds (from Line 28(d))	0.00	-750.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11808.26	100263.32
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 / 78
	<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

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 and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) H Jorgenia Abernathy		Date of Receipt	
	Mailing Address 108 Hoteling Ct		M M / D D / Y Y Y Y Y 1 2 / 0 3 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.86459
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		80.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1000.00		

B.	Full Name (Last, First, Middle Initial) H Jorgenia Abernathy		Date of Receipt	
	Mailing Address 108 Hoteling Ct		M M / D D / Y Y Y Y Y 1 2 / 1 7 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.86595
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		80.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1080.00		

C.	Full Name (Last, First, Middle Initial) H Jorgenia Abernathy		Date of Receipt	
	Mailing Address 108 Hoteling Ct		M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.86731
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		80.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1160.00		

SUBTOTAL of Receipts This Page (optional)	▶	240.00
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 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Bradley Adcock		Date of Receipt	
	Mailing Address 106 Lindenthal Court		M M / D D / Y Y Y Y Y 1 2 / 0 3 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.86461
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		103.25	
Name of Employer BCBSNC		Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2467.67		

B.	Full Name (Last, First, Middle Initial) Bradley Adcock		Date of Receipt	
	Mailing Address 106 Lindenthal Court		M M / D D / Y Y Y Y Y 1 2 / 1 7 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.86597
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		103.25	
Name of Employer BCBSNC		Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2570.92		

C.	Full Name (Last, First, Middle Initial) Bradley Adcock		Date of Receipt	
	Mailing Address 106 Lindenthal Court		M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.86733
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		103.25	
Name of Employer BCBSNC		Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2674.17		

SUBTOTAL of Receipts This Page (optional)	▶	309.75
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 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) John Armentrout		Date of Receipt
	Mailing Address 108 Woodleaf Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 0 3 / 2 0 1 0
	City	State	Zip Code
	Chapel Hill	NC	27516
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.86462
Name of Employer BCBSNC		Occupation Project Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text"/> 10.00

B.	Full Name (Last, First, Middle Initial) John Armentrout		Date of Receipt
	Mailing Address 108 Woodleaf Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 1 7 / 2 0 1 0
	City	State	Zip Code
	Chapel Hill	NC	27516
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.86598
Name of Employer BCBSNC		Occupation Project Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text"/> 10.00

C.	Full Name (Last, First, Middle Initial) John Armentrout		Date of Receipt
	Mailing Address 108 Woodleaf Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 0 / 2 0 1 0
	City	State	Zip Code
	Chapel Hill	NC	27516
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.86734
Name of Employer BCBSNC		Occupation Project Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text"/> 10.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 30.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Daniel Atherton	Date of Receipt MM / DD / YYYY 12 / 03 / 2010
	Mailing Address 8800 Hatton Court	Transaction ID: SA11AI.86463
	City State Zip Code Charlotte NC 28277	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Regional Sales Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

B.	Full Name (Last, First, Middle Initial) Daniel Atherton	Date of Receipt MM / DD / YYYY 12 / 17 / 2010
	Mailing Address 8800 Hatton Court	Transaction ID: SA11AI.86599
	City State Zip Code Charlotte NC 28277	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Regional Sales Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 625.00	

C.	Full Name (Last, First, Middle Initial) Daniel Atherton	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 8800 Hatton Court	Transaction ID: SA11AI.86735
	City State Zip Code Charlotte NC 28277	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Regional Sales Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	75.00
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 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) J. Joseph Bauers		Date of Receipt	
	Mailing Address 203 Woodleaf Dr.		M M / D D / Y Y Y Y Y 1 2 / 0 3 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.86466
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		15.00	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00		

B.	Full Name (Last, First, Middle Initial) J. Joseph Bauers		Date of Receipt	
	Mailing Address 203 Woodleaf Dr.		M M / D D / Y Y Y Y Y 1 2 / 1 7 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.86602
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		15.00	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00		

C.	Full Name (Last, First, Middle Initial) J. Joseph Bauers		Date of Receipt	
	Mailing Address 203 Woodleaf Dr.		M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.86738
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		15.00	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00		

SUBTOTAL of Receipts This Page (optional)	▶	45.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 11 / 78
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Tracy Bennett

Mailing Address 208 Linville Springs Rd.

City State Zip Code
Kernersville NC 27248

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.86467

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Tracy Bennett

Mailing Address 208 Linville Springs Rd.

City State Zip Code
Kernersville NC 27248

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.86603

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Tracy Bennett

Mailing Address 208 Linville Springs Rd.

City State Zip Code
Kernersville NC 27248

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.86739

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **30.00**

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 12 / 78
<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Gary Bolt		Date of Receipt	
	Mailing Address 4801 Highgate Drive		M M / D D / Y Y Y Y Y 1 2 / 0 3 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.86469
	Durham	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		64.04	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1528.88		

B.	Full Name (Last, First, Middle Initial) Gary Bolt		Date of Receipt	
	Mailing Address 4801 Highgate Drive		M M / D D / Y Y Y Y Y 1 2 / 1 7 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.86605
	Durham	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		64.04	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1592.92		

C.	Full Name (Last, First, Middle Initial) Gary Bolt		Date of Receipt	
	Mailing Address 4801 Highgate Drive		M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.86741
	Durham	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		64.04	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1656.96		

SUBTOTAL of Receipts This Page (optional)	▶	192.12
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 13 / 78
	<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

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 and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) H Lewis Borman		Date of Receipt
	Mailing Address 104 Ironwoods Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 0 3 / 2 0 1 0
	City	State	Zip Code
	Chapel Hill	NC	27516
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.86470
Name of Employer BCBSNC		Occupation Program Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 389.64	<input type="text"/> 16.34

B.	Full Name (Last, First, Middle Initial) H Lewis Borman		Date of Receipt
	Mailing Address 104 Ironwoods Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 1 7 / 2 0 1 0
	City	State	Zip Code
	Chapel Hill	NC	27516
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.86606
Name of Employer BCBSNC		Occupation Program Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 405.98	<input type="text"/> 16.34

C.	Full Name (Last, First, Middle Initial) H Lewis Borman		Date of Receipt
	Mailing Address 104 Ironwoods Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 0 / 2 0 1 0
	City	State	Zip Code
	Chapel Hill	NC	27516
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.86742
Name of Employer BCBSNC		Occupation Program Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 422.32	<input type="text"/> 16.34

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 49.02
TOTAL This Period (last page this line number only)	<input type="text"/>

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 14 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) W Don Bradley	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 3 / 2 0 1 0
	Mailing Address 15 Altmont Ct	Transaction ID: SA11AI.86471
	City State Zip Code Durham NC 27705	Amount of Each Receipt this Period 135.38
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3249.12	

B.	Full Name (Last, First, Middle Initial) W Don Bradley	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 7 / 2 0 1 0
	Mailing Address 15 Altmont Ct	Transaction ID: SA11AI.86607
	City State Zip Code Durham NC 27705	Amount of Each Receipt this Period 135.38
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3384.50	

C.	Full Name (Last, First, Middle Initial) W Don Bradley	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 1 0
	Mailing Address 15 Altmont Ct	Transaction ID: SA11AI.86743
	City State Zip Code Durham NC 27705	Amount of Each Receipt this Period 135.38
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3519.88	

SUBTOTAL of Receipts This Page (optional)	406.14
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 15 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) L Wade Brown	Date of Receipt MM / DD / YYYY 12 / 03 / 2010
	Mailing Address	Transaction ID: SA11AI.86473
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Producer Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

B.	Full Name (Last, First, Middle Initial) L Wade Brown	Date of Receipt MM / DD / YYYY 12 / 17 / 2010
	Mailing Address	Transaction ID: SA11AI.86609
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Producer Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

C.	Full Name (Last, First, Middle Initial) L Wade Brown	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address	Transaction ID: SA11AI.86745
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Producer Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 78
(check only one)

<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
L Lisa Cade

Mailing Address 104 Ackworth Court

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.86476

Amount of Each Receipt this Period
 50.00

B.

Full Name (Last, First, Middle Initial)
L Lisa Cade

Mailing Address 104 Ackworth Court

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.86612

Amount of Each Receipt this Period
 50.00

C.

Full Name (Last, First, Middle Initial)
L Lisa Cade

Mailing Address 104 Ackworth Court

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.86748

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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

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

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

FOR LINE NUMBER: PAGE 17 / 78
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michele Cash

Mailing Address 8094 Grassy Creek Road

City State Zip Code
Oxford NC 27565

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

Name of Employer BCBSNC Occupation Senior Compensation Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 665.51

Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.86478

Amount of Each Receipt this Period
28.07

B. Full Name (Last, First, Middle Initial)
Michele Cash

Mailing Address 8094 Grassy Creek Road

City State Zip Code
Oxford NC 27565

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

Name of Employer BCBSNC Occupation Senior Compensation Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 693.58

Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.86614

Amount of Each Receipt this Period
28.07

C. Full Name (Last, First, Middle Initial)
Michele Cash

Mailing Address 8094 Grassy Creek Road

City State Zip Code
Oxford NC 27565

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

Name of Employer BCBSNC Occupation Senior Compensation Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 721.65

Date of Receipt
 M M / D D / Y Y Y Y
 1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.86750

Amount of Each Receipt this Period
28.07

SUBTOTAL of Receipts This Page (optional) ► 84.21

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 18 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Steven Cherrier			Date of Receipt MM / DD / YYYY 12 / 03 / 2010		
	Mailing Address 1207 Holly Creek Lane			Transaction ID: SA11AI.86479		
	City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 20.00		
	FEC ID number of contributing federal political committee. C					
	Name of Employer BCBSNC	Occupation Director		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 480.00						

B.	Full Name (Last, First, Middle Initial) Steven Cherrier			Date of Receipt MM / DD / YYYY 12 / 17 / 2010		
	Mailing Address 1207 Holly Creek Lane			Transaction ID: SA11AI.86615		
	City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 20.00		
	FEC ID number of contributing federal political committee. C					
	Name of Employer BCBSNC	Occupation Director		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 500.00						

C.	Full Name (Last, First, Middle Initial) Steven Cherrier			Date of Receipt MM / DD / YYYY 12 / 30 / 2010		
	Mailing Address 1207 Holly Creek Lane			Transaction ID: SA11AI.86751		
	City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 20.00		
	FEC ID number of contributing federal political committee. C					
	Name of Employer BCBSNC	Occupation Director		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 520.00						

SUBTOTAL of Receipts This Page (optional)	▶	60.00
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 19 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Ellison Clary		Date of Receipt	
	Mailing Address 415 North Church St Unit 113		M M / D D / Y Y Y Y Y 1 2 / 0 3 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.86482
	Charlotte	NC	28202	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		46.15	
Name of Employer BCBSNC		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.75		

B.	Full Name (Last, First, Middle Initial) Ellison Clary		Date of Receipt	
	Mailing Address 415 North Church St Unit 113		M M / D D / Y Y Y Y Y 1 2 / 1 7 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.86617
	Charlotte	NC	28202	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		46.15	
Name of Employer BCBSNC		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 276.90		

C.	Full Name (Last, First, Middle Initial) Ellison Clary		Date of Receipt	
	Mailing Address 415 North Church St Unit 113		M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.86753
	Charlotte	NC	28202	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		46.15	
Name of Employer BCBSNC		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 323.05		

SUBTOTAL of Receipts This Page (optional)	▶	138.45
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 78
(check only one)

<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
M Stephen Dean

Mailing Address 505 Lake Hogan Farm Rd

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1235.66

Date of Receipt
MM / DD / YYYY
12 / 03 / 2010

Transaction ID: SA11AI.86489

Amount of Each Receipt this Period
56.25

B.

Full Name (Last, First, Middle Initial)
M Stephen Dean

Mailing Address 505 Lake Hogan Farm Rd

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1291.91

Date of Receipt
MM / DD / YYYY
12 / 17 / 2010

Transaction ID: SA11AI.86624

Amount of Each Receipt this Period
56.25

C.

Full Name (Last, First, Middle Initial)
M Stephen Dean

Mailing Address 505 Lake Hogan Farm Rd

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1348.16

Date of Receipt
MM / DD / YYYY
12 / 30 / 2010

Transaction ID: SA11AI.86760

Amount of Each Receipt this Period
56.25

SUBTOTAL of Receipts This Page (optional) ► **168.75**

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 21 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) G Diane DeGroff	Date of Receipt MM / DD / YYYY 12 / 03 / 2010
	Mailing Address	Transaction ID: SA11AI.86491
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 613.46	

B.	Full Name (Last, First, Middle Initial) G Diane DeGroff	Date of Receipt MM / DD / YYYY 12 / 17 / 2010
	Mailing Address	Transaction ID: SA11AI.86626
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 638.46	

C.	Full Name (Last, First, Middle Initial) G Diane DeGroff	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address	Transaction ID: SA11AI.86762
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 663.46	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 78
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) M Karen Dickinson	Date of Receipt MM / DD / YYYY 12 / 03 / 2010
	Mailing Address 105 Corewood Court	Transaction ID: SA11AI.86492
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 31.73
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 683.33	

B.	Full Name (Last, First, Middle Initial) M Karen Dickinson	Date of Receipt MM / DD / YYYY 12 / 17 / 2010
	Mailing Address 105 Corewood Court	Transaction ID: SA11AI.86627
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 31.73
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 715.06	

C.	Full Name (Last, First, Middle Initial) M Karen Dickinson	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 105 Corewood Court	Transaction ID: SA11AI.86763
	City State Zip Code Durham NC 27713	Amount of Each Receipt this Period 31.73
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 746.79	

SUBTOTAL of Receipts This Page (optional)	95.19
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 23 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Berlinda Duncan

Mailing Address 21 Burgess Lane

City State Zip Code
Durham NC 27707

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

Name of Employer BCBSNC Occupation Business Applications

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.76

Date of Receipt
M M / D D / Y Y Y Y
12 / 17 / 2010

Transaction ID: SA11AI.86630

Amount of Each Receipt this Period
2.00

B. Full Name (Last, First, Middle Initial)
Berlinda Duncan

Mailing Address 21 Burgess Lane

City State Zip Code
Durham NC 27707

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

Name of Employer BCBSNC Occupation Business Applications

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 203.76

Date of Receipt
M M / D D / Y Y Y Y
12 / 30 / 2010

Transaction ID: SA11AI.86766

Amount of Each Receipt this Period
2.00

C. Full Name (Last, First, Middle Initial)
James Emmons

Mailing Address 105 Vyne Court

City State Zip Code
Cary NC 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1785.44

Date of Receipt
M M / D D / Y Y Y Y
12 / 03 / 2010

Transaction ID: SA11AI.86496

Amount of Each Receipt this Period
77.88

SUBTOTAL of Receipts This Page (optional) ► **81.88**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 78
(check only one)

<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
James Emmons

Mailing Address 105 Vyne Court

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1863.32

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.86631

Amount of Each Receipt this Period
 77.88

B.

Full Name (Last, First, Middle Initial)
James Emmons

Mailing Address 105 Vyne Court

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1933.41

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.86767

Amount of Each Receipt this Period
 70.09

C.

Full Name (Last, First, Middle Initial)
A Christine Evans

Mailing Address 606 W. Aycock Street

City Raleigh State NC Zip Code 27608

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 614.89

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.86497

Amount of Each Receipt this Period
 41.15

SUBTOTAL of Receipts This Page (optional) ► 189.12

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 78
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
A Christine Evans
Mailing Address 606 W. Aycock Street

City Raleigh State NC Zip Code 27608

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 652.39

Date of Receipt: 12 / 17 / 2010
Transaction ID: SA11AI.86632
 Amount of Each Receipt this Period: 37.50

B. Full Name (Last, First, Middle Initial)
A Christine Evans
Mailing Address 606 W. Aycock Street

City Raleigh State NC Zip Code 27608

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 689.89

Date of Receipt: 12 / 30 / 2010
Transaction ID: SA11AI.86768
 Amount of Each Receipt this Period: 37.50

C. Full Name (Last, First, Middle Initial)
M Robert Fleming
Mailing Address 211 St. Mary's Street

City Raleigh State NC Zip Code 27605

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1207.42

Date of Receipt: 12 / 03 / 2010
Transaction ID: SA11AI.86498
 Amount of Each Receipt this Period: 52.61

SUBTOTAL of Receipts This Page (optional) ► 127.61

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 26 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) M Robert Fleming		Date of Receipt	
	Mailing Address 211 St. Mary's Street		M M / D D / Y Y Y Y Y 12 / 17 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86633
	Raleigh	NC	27605	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		52.61	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1260.03		

B.	Full Name (Last, First, Middle Initial) M Robert Fleming		Date of Receipt	
	Mailing Address 211 St. Mary's Street		M M / D D / Y Y Y Y Y 12 / 30 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86769
	Raleigh	NC	27605	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		52.61	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1312.64		

C.	Full Name (Last, First, Middle Initial) John Fong		Date of Receipt	
	Mailing Address		M M / D D / Y Y Y Y Y 12 / 03 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86499
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
			25.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		719.24		

SUBTOTAL of Receipts This Page (optional)	▶	130.22
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 78
(check only one)

<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) John Fong</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC</p> <p>Occupation VP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 744.24</p>	<p>Date of Receipt <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 2 / 1 7 / 2 0 1 0</td> </tr> </table> </p> <p>Transaction ID: SA11AI.86634</p> <p>Amount of Each Receipt this Period 25.00</p>	M M / D D / Y Y Y Y	1 2 / 1 7 / 2 0 1 0
M M / D D / Y Y Y Y			
1 2 / 1 7 / 2 0 1 0			

<p>B. Full Name (Last, First, Middle Initial) John Fong</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC</p> <p>Occupation VP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 769.24</p>	<p>Date of Receipt <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 2 / 3 0 / 2 0 1 0</td> </tr> </table> </p> <p>Transaction ID: SA11AI.86770</p> <p>Amount of Each Receipt this Period 25.00</p>	M M / D D / Y Y Y Y	1 2 / 3 0 / 2 0 1 0
M M / D D / Y Y Y Y			
1 2 / 3 0 / 2 0 1 0			

<p>C. Full Name (Last, First, Middle Initial) Donald Fowler</p> <p>Mailing Address 2413 Eddystone Road</p> <p>City State Zip Code Raleigh NC 27612</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSNC</p> <p>Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 253.86</p>	<p>Date of Receipt <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 2 / 0 3 / 2 0 1 0</td> </tr> </table> </p> <p>Transaction ID: SA11AI.86500</p> <p>Amount of Each Receipt this Period 84.62</p>	M M / D D / Y Y Y Y	1 2 / 0 3 / 2 0 1 0
M M / D D / Y Y Y Y			
1 2 / 0 3 / 2 0 1 0			

SUBTOTAL of Receipts This Page (optional)	134.62
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 78

(check only one)

<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)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Donald Fowler

Mailing Address 2413 Eddystone Road

City State Zip Code
Raleigh NC 27612

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

Name of Employer Occupation
BCBSNC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
338.48

Date of Receipt

M M / D D / Y Y Y Y
12 / 17 / 2010

Transaction ID: SA11AI.86635

Amount of Each Receipt this Period

84.62

B.

Full Name (Last, First, Middle Initial)

Donald Fowler

Mailing Address 2413 Eddystone Road

City State Zip Code
Raleigh NC 27612

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

Name of Employer Occupation
BCBSNC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
423.10

Date of Receipt

M M / D D / Y Y Y Y
12 / 30 / 2010

Transaction ID: SA11AI.86771

Amount of Each Receipt this Period

84.62

C.

Full Name (Last, First, Middle Initial)

Kathi Gaines

Mailing Address 603 Kingswood Drive

City State Zip Code
Cary NC 27513

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

Name of Employer Occupation
BCBSNC Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1207.19

Date of Receipt

M M / D D / Y Y Y Y
12 / 03 / 2010

Transaction ID: SA11AI.86502

Amount of Each Receipt this Period

50.51

SUBTOTAL of Receipts This Page (optional) ▶

219.75

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 29 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kathi Gaines		Date of Receipt
	Mailing Address 603 Kingswood Drive		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.86637
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.51"/>
		<input type="text" value="1257.70"/>	

B.	Full Name (Last, First, Middle Initial) Kathi Gaines		Date of Receipt
	Mailing Address 603 Kingswood Drive		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Cary	NC	27513
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.86773
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.51"/>
		<input type="text" value="1308.21"/>	

C.	Full Name (Last, First, Middle Initial) K Patrick Getzen		Date of Receipt
	Mailing Address 205 Chilcott		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Apex	NC	27502
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.86504
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="2346.16"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="201.02"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 78
(check only one)

<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
K Patrick Getzen

Mailing Address 205 Chilcott

City State Zip Code
Apex NC 27502

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2446.16

Date of Receipt
M M / D D / Y Y Y Y
12 / 17 / 2010

Transaction ID: SA11AI.86639

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
K Patrick Getzen

Mailing Address 205 Chilcott

City State Zip Code
Apex NC 27502

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2546.16

Date of Receipt
M M / D D / Y Y Y Y
12 / 30 / 2010

Transaction ID: SA11AI.86774

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
K Ian Gordon

Mailing Address 100 Village Circle Way Apt337

City State Zip Code
Durham NC 27713

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2753.76

Date of Receipt
M M / D D / Y Y Y Y
12 / 03 / 2010

Transaction ID: SA11AI.86505

Amount of Each Receipt this Period
115.38

SUBTOTAL of Receipts This Page (optional) ► **315.38**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 78
(check only one)

<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) K Ian Gordon		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 7 / 2 0 1 0	
Mailing Address 100 Village Circle Way Apt337		Transaction ID: SA11AI.86640	
City Durham	State NC	Zip Code 27713	Amount of Each Receipt this Period 115.38
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2869.14		

B.

Full Name (Last, First, Middle Initial) K Ian Gordon		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 1 0	
Mailing Address 100 Village Circle Way Apt337		Transaction ID: SA11AI.86775	
City Durham	State NC	Zip Code 27713	Amount of Each Receipt this Period 115.38
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2984.52		

C.

Full Name (Last, First, Middle Initial) Laura Gorry		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 3 / 2 0 1 0	
Mailing Address 2566 Ironwood Drive		Transaction ID: SA11AI.86506	
City Hickory	State NC	Zip Code 28602	Amount of Each Receipt this Period 35.77
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation Regional Service Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00		

SUBTOTAL of Receipts This Page (optional)	▶	266.53
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 78

(check only one)

<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)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Laura Gorry

Mailing Address 2566 Ironwood Drive

City State Zip Code
Hickory NC 28602

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

Name of Employer Occupation
BCBSNC Regional Service Manager

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 885.77

Date of Receipt

M M / D D / Y Y Y Y
12 / 17 / 2010

Transaction ID: SA11AI.86641

Amount of Each Receipt this Period

35.77

B.

Full Name (Last, First, Middle Initial)

Laura Gorry

Mailing Address 2566 Ironwood Drive

City State Zip Code
Hickory NC 28602

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

Name of Employer Occupation
BCBSNC Regional Service Manager

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 921.54

Date of Receipt

M M / D D / Y Y Y Y
12 / 30 / 2010

Transaction ID: SA11AI.86776

Amount of Each Receipt this Period

35.77

C.

Full Name (Last, First, Middle Initial)

Mr. Darrell Grissom, II

Mailing Address 1105 New Hampshire Drive

City State Zip Code
Jamestown NC 27282

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

Name of Employer Occupation
BCBSNC Consumer Sales Manager

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 317.29

Date of Receipt

M M / D D / Y Y Y Y
12 / 03 / 2010

Transaction ID: SA11AI.86507

Amount of Each Receipt this Period

13.56

SUBTOTAL of Receipts This Page (optional) ►

85.10

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

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

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

FOR LINE NUMBER: PAGE 33 / 78
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Darrell Grissom, II

Mailing Address 1105 New Hampshire Drive

City State Zip Code
Jamestown NC 27282

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

Name of Employer BCBSNC Occupation Consumer Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.85

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.86642

Amount of Each Receipt this Period
13.56

B. Full Name (Last, First, Middle Initial)
Mr. Darrell Grissom, II

Mailing Address 1105 New Hampshire Drive

City State Zip Code
Jamestown NC 27282

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

Name of Employer BCBSNC Occupation Consumer Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 344.41

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.86777

Amount of Each Receipt this Period
13.56

C. Full Name (Last, First, Middle Initial)
Charles Harvey

Mailing Address 426 Holly Springs Dr

City State Zip Code
Timberlake NC 27583

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

Name of Employer BCBSNC Occupation Inst. Designer & Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 326.24

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.86509

Amount of Each Receipt this Period
13.67

SUBTOTAL of Receipts This Page (optional) ► **40.79**

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 34 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Charles Harvey	Date of Receipt MM / DD / YYYY 12 / 17 / 2010
	Mailing Address 426 Holly Springs Dr	Transaction ID: SA11AI.86644
	City State Zip Code Timberlake NC 27583	Amount of Each Receipt this Period 13.67
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Inst. Designer & Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 339.91	

B.	Full Name (Last, First, Middle Initial) Charles Harvey	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 426 Holly Springs Dr	Transaction ID: SA11AI.86779
	City State Zip Code Timberlake NC 27583	Amount of Each Receipt this Period 13.67
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Inst. Designer & Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 353.58	

C.	Full Name (Last, First, Middle Initial) Patricia Hatfield	Date of Receipt MM / DD / YYYY 12 / 03 / 2010
	Mailing Address 102 Oak Spring Court	Transaction ID: SA11AI.86511
	City State Zip Code Carrboro NC 27510	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Assoc. General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	37.34
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 78
(check only one)

<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Patricia Hatfield

Mailing Address 102 Oak Spring Court

City Carrboro State NC Zip Code 27510

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

Name of Employer BCBSNC Occupation Assoc. General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 12 / 17 / 2010
Transaction ID: SA11AI.86646
 Amount of Each Receipt this Period: 10.00

B.

Full Name (Last, First, Middle Initial)
Patricia Hatfield

Mailing Address 102 Oak Spring Court

City Carrboro State NC Zip Code 27510

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

Name of Employer BCBSNC Occupation Assoc. General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 30 / 2010
Transaction ID: SA11AI.86781
 Amount of Each Receipt this Period: 10.00

C.

Full Name (Last, First, Middle Initial)
O Susan Hauck

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation Case Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 12 / 03 / 2010
Transaction ID: SA11AI.86513
 Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ► 45.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 78

(check only one)

<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)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

O Susan Hauck

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
Case Manager

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.86648

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

O Susan Hauck

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
Case Manager

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.86783

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Sarah Hearn

Mailing Address 1181 Bowers Store Road

City

State

Zip Code

Siler City

NC

27344

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
Manager

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

467.04

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.86514

Amount of Each Receipt this Period

19.46

SUBTOTAL of Receipts This Page (optional)

69.46

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 37 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Sarah Hearn	Date of Receipt
	Mailing Address 1181 Bowers Store Road	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 12 / 17 / 2010
	City State Zip Code Siler City NC 27344	Transaction ID: SA11AI.86649
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 19.46
	Name of Employer BCBSNC Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 486.50	

B.	Full Name (Last, First, Middle Initial) Sarah Hearn	Date of Receipt
	Mailing Address 1181 Bowers Store Road	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 12 / 30 / 2010
	City State Zip Code Siler City NC 27344	Transaction ID: SA11AI.86784
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 19.46
	Name of Employer BCBSNC Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 505.96	

C.	Full Name (Last, First, Middle Initial) Ms Susan Helm-Murtagh	Date of Receipt
	Mailing Address 117 Oldham Place	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 12 / 03 / 2010
	City State Zip Code Chapel Hill NC 27516	Transaction ID: SA11AI.86515
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 69.23
	Name of Employer BCBSNC Occupation Resource Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 1653.84	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 108.15
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 78
(check only one)

<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1723.07

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 17 / 2010

Transaction ID: SA11AI.86650

Amount of Each Receipt this Period
69.23

B.

Full Name (Last, First, Middle Initial)
Ms Susan Helm-Murtagh

Mailing Address 117 Oldham Place

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation Resource Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1792.30

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 30 / 2010

Transaction ID: SA11AI.86785

Amount of Each Receipt this Period
69.23

C.

Full Name (Last, First, Middle Initial)
Ms Kathryn Higgins

Mailing Address 734 Crabtree Crossing

City State Zip Code
Cary NC 27513

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

Name of Employer BCBSNC Occupation Sr. Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 936.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 03 / 2010

Transaction ID: SA11AI.86518

Amount of Each Receipt this Period
39.00

SUBTOTAL of Receipts This Page (optional) ► **177.46**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 78

(check only one)

<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)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms Kathryn Higgins

Mailing Address 734 Crabtree Crossing

City State Zip Code
Cary NC 27513

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

Name of Employer Occupation
BCBSNC Sr. Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 975.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 17 / 2010

Transaction ID: SA11AI.86653

Amount of Each Receipt this Period

39.00

B.

Full Name (Last, First, Middle Initial)

Ms Kathryn Higgins

Mailing Address 734 Crabtree Crossing

City State Zip Code
Cary NC 27513

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

Name of Employer Occupation
BCBSNC Sr. Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1014.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 30 / 2010

Transaction ID: SA11AI.86788

Amount of Each Receipt this Period

39.00

C.

Full Name (Last, First, Middle Initial)

Alan Hughes

Mailing Address

City State Zip Code

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

Name of Employer Occupation
BCBSNC

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 269.24

Date of Receipt

M M / D D / Y Y Y Y
12 / 30 / 2010

Transaction ID: SA11AI.86792

Amount of Each Receipt this Period

134.62

SUBTOTAL of Receipts This Page (optional)

212.62

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 78
(check only one)

<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Stanley Jenkins

Mailing Address 5436 Chimney Swift Dr

City Wake Forest State NC Zip Code 27587

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

Name of Employer BCBSNC Occupation Enterprise Architech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: 12 / 03 / 2010
Transaction ID: SA11AI.86522
 Amount of Each Receipt this Period: 20.00

B.

Full Name (Last, First, Middle Initial)
Stanley Jenkins

Mailing Address 5436 Chimney Swift Dr

City Wake Forest State NC Zip Code 27587

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

Name of Employer BCBSNC Occupation Enterprise Architech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 17 / 2010
Transaction ID: SA11AI.86659
 Amount of Each Receipt this Period: 20.00

C.

Full Name (Last, First, Middle Initial)
Stanley Jenkins

Mailing Address 5436 Chimney Swift Dr

City Wake Forest State NC Zip Code 27587

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

Name of Employer BCBSNC Occupation Enterprise Architech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 12 / 30 / 2010
Transaction ID: SA11AI.86793
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

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

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

FOR LINE NUMBER: PAGE 41 / 78

(check only one)

<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)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Melissa Kempf

Mailing Address 372 Winter Green Road

City State Zip Code
Timberlake NC 27583

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

Name of Employer Occupation
BCBSNC Senior Business Consultant

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 208.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	7		2	0	1	0

Transaction ID: SA11AI.86662

Amount of Each Receipt this Period
8.46

B.

Full Name (Last, First, Middle Initial)

Melissa Kempf

Mailing Address 372 Winter Green Road

City State Zip Code
Timberlake NC 27583

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

Name of Employer Occupation
BCBSNC Senior Business Consultant

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 216.58

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	0		2	0	1	0

Transaction ID: SA11AI.86796

Amount of Each Receipt this Period
8.46

C.

Full Name (Last, First, Middle Initial)

Mr. James Kenley, Sr.

Mailing Address 4670 Elmhurst Drive NE

City State Zip Code
Hickory NC 28601

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

Name of Employer Occupation
BCBSNC VP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2054.88

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	1	0

Transaction ID: SA11AI.86526

Amount of Each Receipt this Period
85.62

SUBTOTAL of Receipts This Page (optional) ▶

102.54

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 78
(check only one)

<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mr. James Kenley, Sr.

Mailing Address 4670 Elmhurst Drive NE

City State Zip Code
Hickory NC 28601

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2140.50

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 17 / 2010

Transaction ID: SA11AI.86663

Amount of Each Receipt this Period
85.62

B.

Full Name (Last, First, Middle Initial)
Mr. James Kenley, Sr.

Mailing Address 4670 Elmhurst Drive NE

City State Zip Code
Hickory NC 28601

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2217.55

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 30 / 2010

Transaction ID: SA11AI.86797

Amount of Each Receipt this Period
77.05

C.

Full Name (Last, First, Middle Initial)
Sean Kerns

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 03 / 2010

Transaction ID: SA11AI.86527

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **172.67**

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 43 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Sean Kerns	Date of Receipt MM / DD / YYYY 12 / 17 / 2010
	Mailing Address	Transaction ID: SA11AI.86664
	City State Zip Code	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

B.	Full Name (Last, First, Middle Initial) Sean Kerns	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address	Transaction ID: SA11AI.86798
	City State Zip Code	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00

C.	Full Name (Last, First, Middle Initial) M Eugenie Komives	Date of Receipt MM / DD / YYYY 12 / 03 / 2010
	Mailing Address 3518 Bluestone Ct.	Transaction ID: SA11AI.86528
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 92.97
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Medical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2184.80

SUBTOTAL of Receipts This Page (optional)	112.97
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 78
(check only one)

<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) M Eugenie Komives		Date of Receipt MM / DD / YYYY 12 / 17 / 2010
Mailing Address 3518 Bluestone Ct.		Transaction ID: SA11AI.86665
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 83.68
Name of Employer BCBSNC	Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2268.48	

B.

Full Name (Last, First, Middle Initial) M Eugenie Komives		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
Mailing Address 3518 Bluestone Ct.		Transaction ID: SA11AI.86799
City Chapel Hill	State NC	Zip Code 27514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 92.97
Name of Employer BCBSNC	Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2361.45	

C.

Full Name (Last, First, Middle Initial) E George Lassiter		Date of Receipt MM / DD / YYYY 12 / 03 / 2010
Mailing Address 1106 Bellenden Drive		Transaction ID: SA11AI.86530
City Durham	State NC	Zip Code 27713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 84.62
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2022.41	

SUBTOTAL of Receipts This Page (optional)	261.27
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 78
(check only one)

<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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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 and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
E George Lassiter

Mailing Address 1106 Bellenden Drive

City State Zip Code
Durham NC 27713

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2107.03

Date of Receipt
M M / D D / Y Y Y Y
12 / 17 / 2010

Transaction ID: SA11AI.86667

Amount of Each Receipt this Period
84.62

B.

Full Name (Last, First, Middle Initial)
E George Lassiter

Mailing Address 1106 Bellenden Drive

City State Zip Code
Durham NC 27713

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2191.65

Date of Receipt
M M / D D / Y Y Y Y
12 / 30 / 2010

Transaction ID: SA11AI.86801

Amount of Each Receipt this Period
84.62

C.

Full Name (Last, First, Middle Initial)
Kenneth Lerner

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 03 / 2010

Transaction ID: SA11AI.86531

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **184.24**

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 46 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kenneth Lerner	Date of Receipt MM / DD / YYYY 12 / 17 / 2010
	Mailing Address	Transaction ID: SA11AI.86668
	City State Zip Code	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00

B.	Full Name (Last, First, Middle Initial) Kenneth Lerner	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address	Transaction ID: SA11AI.86802
	City State Zip Code	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00

C.	Full Name (Last, First, Middle Initial) Lynn McNeal	Date of Receipt MM / DD / YYYY 12 / 03 / 2010
	Mailing Address 185 Swansea Lane	Transaction ID: SA11AI.86535
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 96.16
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2298.22

SUBTOTAL of Receipts This Page (optional)	▶	126.16
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 78
(check only one)

<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Lynn McNeal

Mailing Address 185 Swansea Lane

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2394.38

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	1	0

Transaction ID: SA11AI.86672

Amount of Each Receipt this Period
96.16

B.

Full Name (Last, First, Middle Initial)
Lynn McNeal

Mailing Address 185 Swansea Lane

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2490.54

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.86806

Amount of Each Receipt this Period
96.16

C.

Full Name (Last, First, Middle Initial)
Shirley Michl

Mailing Address 105 Songbird Lane

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation Sr. OD Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	3	/	2	0	1	0

Transaction ID: SA11AI.86537

Amount of Each Receipt this Period
19.61

SUBTOTAL of Receipts This Page (optional) ► **211.93**

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 48 / 78
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt
	Mailing Address 105 Songbird Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 1 7 / 2 0 1 0
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.86674
Name of Employer BCBSNC		Occupation Sr. OD Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 488.37	<input type="text"/> 19.61

B.	Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt
	Mailing Address 105 Songbird Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 0 / 2 0 1 0
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.86808
Name of Employer BCBSNC		Occupation Sr. OD Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 507.98	<input type="text"/> 19.61

C.	Full Name (Last, First, Middle Initial) Kathryn Millican		Date of Receipt
	Mailing Address 1632 Lorraine Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 0 3 / 2 0 1 0
	City	State	Zip Code
	Raleigh	NC	27607
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.86538
Name of Employer BCBSNC		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 494.36	<input type="text"/> 20.94

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 60.16
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 78
(check only one)

<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Date of Receipt																				
Full Name (Last, First, Middle Initial) Kathryn Millican	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	7		2	0	1	0												
Mailing Address 1632 Lorraine Road	Transaction ID: SA11AI.86675																				
City Raleigh State NC Zip Code 27607	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee. C	<table border="1"><tr><td>20.94</td></tr></table>	20.94																			
20.94																					
Name of Employer BCBSNC Occupation Manager																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼																				
	<table border="1"><tr><td>515.30</td></tr></table>	515.30																			
515.30																					

B.	Date of Receipt																				
Full Name (Last, First, Middle Initial) Kathryn Millican	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	0		2	0	1	0												
Mailing Address 1632 Lorraine Road	Transaction ID: SA11AI.86811																				
City Raleigh State NC Zip Code 27607	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee. C	<table border="1"><tr><td>20.94</td></tr></table>	20.94																			
20.94																					
Name of Employer BCBSNC Occupation Manager																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼																				
	<table border="1"><tr><td>536.24</td></tr></table>	536.24																			
536.24																					

C.	Date of Receipt																				
Full Name (Last, First, Middle Initial) Barbara Morales-Burke	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	3		2	0	1	0												
Mailing Address	Transaction ID: SA11AI.86541																				
City Raleigh State NC Zip Code 27607	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee. C	<table border="1"><tr><td>77.00</td></tr></table>	77.00																			
77.00																					
Name of Employer BCBSNC Occupation VP																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼																				
	<table border="1"><tr><td>1848.00</td></tr></table>	1848.00																			
1848.00																					

SUBTOTAL of Receipts This Page (optional)	<table border="1"><tr><td>118.88</td></tr></table>	118.88
118.88		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

**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 50 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Barbara Morales-Burke		Date of Receipt
	Mailing Address		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 1 7 / 2 0 1 0
	City State Zip Code		Transaction ID: SA11AI.86678
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <input type="text"/> 77.00
	Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 1925.00	

B.	Full Name (Last, First, Middle Initial) Barbara Morales-Burke		Date of Receipt
	Mailing Address		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 0 / 2 0 1 0
	City State Zip Code		Transaction ID: SA11AI.86814
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <input type="text"/> 77.00
	Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 2002.00	

C.	Full Name (Last, First, Middle Initial) Maureen OConnor		Date of Receipt
	Mailing Address 104 Beeston Ct.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 0 3 / 2 0 1 0
	City State Zip Code Morrisville NC 27560		Transaction ID: SA11AI.86545
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <input type="text"/> 192.30
	Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 4615.20	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 346.30
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 78
(check only one)

<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Maureen OConnor

Mailing Address 104 Beeston Ct.

City State Zip Code
Morrisville NC 27560

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4807.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	1	0

Transaction ID: SA11AI.86682

Amount of Each Receipt this Period
192.30

B. Full Name (Last, First, Middle Initial)
Maureen OConnor

Mailing Address 104 Beeston Ct.

City State Zip Code
Morrisville NC 27560

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4999.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.86818

Amount of Each Receipt this Period
192.30

C. Full Name (Last, First, Middle Initial)
Fara Palumbo

Mailing Address 1000 Gloucester Ct

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1799.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	3	/	2	0	1	0

Transaction ID: SA11AI.86547

Amount of Each Receipt this Period
77.88

SUBTOTAL of Receipts This Page (optional) ► **462.48**

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 52 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Fara Palumbo		Date of Receipt	
	Mailing Address 1000 Gloucester Ct		M M / D D / Y Y Y Y Y 12 / 17 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86684
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		77.88	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1876.92		

B.	Full Name (Last, First, Middle Initial) Fara Palumbo		Date of Receipt	
	Mailing Address 1000 Gloucester Ct		M M / D D / Y Y Y Y Y 12 / 30 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86820
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		77.88	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1954.80		

C.	Full Name (Last, First, Middle Initial) Michael J Parkerson		Date of Receipt	
	Mailing Address 7504 Clayshant Court		M M / D D / Y Y Y Y Y 12 / 03 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86548
	Wake Forest	NC	27587	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		25.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		600.00		

SUBTOTAL of Receipts This Page (optional)	▶	180.76
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 53 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Michael J Parkerson	Date of Receipt
	Mailing Address 7504 Clayshant Court	<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City State Zip Code Wake Forest NC 27587	Transaction ID: SA11AI.86685
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="25.00"/>
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="625.00"/>	

B.	Full Name (Last, First, Middle Initial) Michael J Parkerson	Date of Receipt
	Mailing Address 7504 Clayshant Court	<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City State Zip Code Wake Forest NC 27587	Transaction ID: SA11AI.86821
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="25.00"/>
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="650.00"/>	

C.	Full Name (Last, First, Middle Initial) M Silas Payne	Date of Receipt
	Mailing Address 2306 Buckquarter Farms Rd	<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City State Zip Code Hillsborough NC 27278	Transaction ID: SA11AI.86549
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="20.00"/>
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="320.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="70.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 54 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) M Silas Payne		Date of Receipt		
	Mailing Address 2306 Buckquarter Farms Rd		M M / D D / Y Y Y Y Y 1 2 / 1 7 / 2 0 1 0		
	City Hillsborough	State NC	Zip Code 27278	Transaction ID: SA11AI.86686	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00		
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date ▼ 340.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) M Silas Payne		Date of Receipt		
	Mailing Address 2306 Buckquarter Farms Rd		M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 1 0		
	City Hillsborough	State NC	Zip Code 27278	Transaction ID: SA11AI.86824	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00		
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date ▼ 360.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Gerald Petkau		Date of Receipt		
	Mailing Address 402 Troycott Place		M M / D D / Y Y Y Y Y 1 2 / 0 3 / 2 0 1 0		
	City Cary	State NC	Zip Code 27519	Transaction ID: SA11AI.86551	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 173.08		
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date ▼ 4098.13		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	▶	213.08
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 55 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Gerald Petkau	Date of Receipt
	Mailing Address 402 Troycott Place	<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City State Zip Code Cary NC 27519	Transaction ID: SA11AI.86688
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="173.08"/>
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="4271.21"/>	

B.	Full Name (Last, First, Middle Initial) Gerald Petkau	Date of Receipt
	Mailing Address 402 Troycott Place	<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City State Zip Code Cary NC 27519	Transaction ID: SA11AI.86826
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="173.08"/>
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="4444.29"/>	

C.	Full Name (Last, First, Middle Initial) Jocelyn Pickett	Date of Receipt
	Mailing Address 203 Chancellor's Ridge	<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City State Zip Code Durham NC 27713	Transaction ID: SA11AI.86554
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="30.81"/>
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="739.44"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="376.97"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 56 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jocelyn Pickett			Date of Receipt MM / DD / YYYY 12 / 17 / 2010		
	Mailing Address 203 Chancellor's Ridge			Transaction ID: SA11AI.86691		
	City	State	Zip Code	Amount of Each Receipt this Period		
	Durham	NC	27713	30.81		
	FEC ID number of contributing federal political committee. C					
Name of Employer BCBSNC		Occupation Director				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 770.25				

B.	Full Name (Last, First, Middle Initial) Jocelyn Pickett			Date of Receipt MM / DD / YYYY 12 / 30 / 2010		
	Mailing Address 203 Chancellor's Ridge			Transaction ID: SA11AI.86829		
	City	State	Zip Code	Amount of Each Receipt this Period		
	Durham	NC	27713	30.81		
	FEC ID number of contributing federal political committee. C					
Name of Employer BCBSNC		Occupation Director				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 801.06				

C.	Full Name (Last, First, Middle Initial) K Nathan Prather			Date of Receipt MM / DD / YYYY 12 / 03 / 2010		
	Mailing Address 319 Montibello Drive			Transaction ID: SA11AI.86557		
	City	State	Zip Code	Amount of Each Receipt this Period		
	Cary	NC	27513	75.00		
	FEC ID number of contributing federal political committee. C					
Name of Employer BCBSNC		Occupation VP				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1080.00				

SUBTOTAL of Receipts This Page (optional)	▶	136.62
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 57 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) K Nathan Prather	Date of Receipt M M / D D / Y Y Y Y 12 / 17 / 2010
	Mailing Address 319 Montibello Drive	Transaction ID: SA11AI.86694
	City Cary State NC Zip Code 27513	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1155.00	

B.	Full Name (Last, First, Middle Initial) K Nathan Prather	Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2010
	Mailing Address 319 Montibello Drive	Transaction ID: SA11AI.86832
	City Cary State NC Zip Code 27513	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1230.00	

C.	Full Name (Last, First, Middle Initial) B Christy Radcliff	Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2010
	Mailing Address	Transaction ID: SA11AI.86559
	City State Zip Code	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Account Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 240.00	

SUBTOTAL of Receipts This Page (optional)	160.00
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 58 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) B Christy Radcliff	Date of Receipt MM / DD / YYYY 12 / 17 / 2010
	Mailing Address	Transaction ID: SA11AI.86695
	City State Zip Code	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	Name of Employer: BCBSNC Occupation: Account Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

B.	Full Name (Last, First, Middle Initial) B Christy Radcliff	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address	Transaction ID: SA11AI.86833
	City State Zip Code	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	Name of Employer: BCBSNC Occupation: Account Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00

C.	Full Name (Last, First, Middle Initial) Paul Reeves	Date of Receipt MM / DD / YYYY 12 / 03 / 2010
	Mailing Address 236 Coachlight Trail	Transaction ID: SA11AI.86562
	City State Zip Code Burlington NC 27215	Amount of Each Receipt this Period 30.45
	FEC ID number of contributing federal political committee. C	Name of Employer: BCBSNC Occupation: Project Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 730.80

SUBTOTAL of Receipts This Page (optional)	50.45
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 59 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt	
	Mailing Address 236 Coachlight Trail		M M / D D / Y Y Y Y Y 12 / 17 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86698
	Burlington	NC	27215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		30.45	
Name of Employer BCBSNC		Occupation Project Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 761.25		

B.	Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt	
	Mailing Address 236 Coachlight Trail		M M / D D / Y Y Y Y Y 12 / 30 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86836
	Burlington	NC	27215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		30.45	
Name of Employer BCBSNC		Occupation Project Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 791.70		

C.	Full Name (Last, First, Middle Initial) Melissa Robinson		Date of Receipt	
	Mailing Address		M M / D D / Y Y Y Y Y 12 / 03 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86564
				Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		27.88	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 649.84		

SUBTOTAL of Receipts This Page (optional)	▶	88.78
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 60 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Melissa Robinson	Date of Receipt
	Mailing Address	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 12 / 17 / 2010
	City State Zip Code	Transaction ID: SA11AI.86700
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 25.09
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 674.93	

B.	Full Name (Last, First, Middle Initial) Melissa Robinson	Date of Receipt
	Mailing Address	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 12 / 30 / 2010
	City State Zip Code	Transaction ID: SA11AI.86838
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 27.88
Name of Employer BCBSNC	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 702.81	

C.	Full Name (Last, First, Middle Initial) Mr. John Roos	Date of Receipt
	Mailing Address 119 Draymore Way	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 12 / 03 / 2010
	City State Zip Code Morrisville NC 27560	Transaction ID: SA11AI.86565
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 192.30
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 4615.20	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 245.27
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 / 78
(check only one)

<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mr. John Roos

Mailing Address 119 Draymore Way

City State Zip Code
Morrisville NC 27560

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4807.50

Date of Receipt
M M / D D / Y Y Y Y
12 / 17 / 2010

Transaction ID: SA11AI.86701

Amount of Each Receipt this Period
192.30

B.

Full Name (Last, First, Middle Initial)
Mr. John Roos

Mailing Address 119 Draymore Way

City State Zip Code
Morrisville NC 27560

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4999.80

Date of Receipt
M M / D D / Y Y Y Y
12 / 30 / 2010

Transaction ID: SA11AI.86839

Amount of Each Receipt this Period
192.30

C.

Full Name (Last, First, Middle Initial)
V Tarsha Rowland

Mailing Address 5021 Robinwood Rd

City State Zip Code
Durham NC 27713

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
847.64

Date of Receipt
M M / D D / Y Y Y Y
12 / 03 / 2010

Transaction ID: SA11AI.86566

Amount of Each Receipt this Period
35.60

SUBTOTAL of Receipts This Page (optional) ► **420.20**

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 62 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) V Tarsha Rowland		Date of Receipt	
	Mailing Address 5021 Robinwood Rd		M M / D D / Y Y Y Y 12 / 17 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86702
	Durham	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		28.48	
	Name of Employer BCBSNC	Occupation Director	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		876.12		

B.	Full Name (Last, First, Middle Initial) V Tarsha Rowland		Date of Receipt	
	Mailing Address 5021 Robinwood Rd		M M / D D / Y Y Y Y 12 / 30 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86840
	Durham	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		32.04	
	Name of Employer BCBSNC	Occupation Director	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		908.16		

C.	Full Name (Last, First, Middle Initial) A Leon Sabarsky		Date of Receipt	
	Mailing Address		M M / D D / Y Y Y Y 12 / 03 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86567
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
			34.04	
	Name of Employer BCBSNC	Occupation Program Director	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		810.14		

SUBTOTAL of Receipts This Page (optional)	▶	94.56
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 63 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) A Leon Sabarsky	Date of Receipt
	Mailing Address	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 1 7 / 2 0 1 0
	City State Zip Code	Transaction ID: SA11AI.86703
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period <input type="text"/> 37.44
Name of Employer BCBSNC	Occupation Program Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 847.58	

B.	Full Name (Last, First, Middle Initial) A Leon Sabarsky	Date of Receipt
	Mailing Address	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 0 / 2 0 1 0
	City State Zip Code	Transaction ID: SA11AI.86841
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period <input type="text"/> 34.04
Name of Employer BCBSNC	Occupation Program Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 881.62	

C.	Full Name (Last, First, Middle Initial) M Gayle Sauer	Date of Receipt
	Mailing Address	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 0 3 / 2 0 1 0
	City State Zip Code	Transaction ID: SA11AI.86569
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period <input type="text"/> 30.00
Name of Employer BCBSNC	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 720.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 101.48
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 64 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) M Gayle Sauer	Date of Receipt MM / DD / YYYY 12 / 17 / 2010
	Mailing Address	Transaction ID: SA11AI.86705
	City State Zip Code	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00	

B.	Full Name (Last, First, Middle Initial) M Gayle Sauer	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address	Transaction ID: SA11AI.86843
	City State Zip Code	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 780.00	

C.	Full Name (Last, First, Middle Initial) R John Smith	Date of Receipt MM / DD / YYYY 12 / 03 / 2010
	Mailing Address 8320 Shiloh Creek Court	Transaction ID: SA11AI.86571
	City State Zip Code Raleigh NC 27616	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Medical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	85.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 / 78
(check only one)

<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) R John Smith		Date of Receipt MM / DD / YYYY 12 / 17 / 2010
Mailing Address 8320 Shiloh Creek Court		Transaction ID: SA11AI.86707
City Raleigh	State NC	Zip Code 27616
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer BCBSNC	Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

B.

Full Name (Last, First, Middle Initial) R John Smith		Date of Receipt MM / DD / YYYY 12 / 30 / 2010
Mailing Address 8320 Shiloh Creek Court		Transaction ID: SA11AI.86845
City Raleigh	State NC	Zip Code 27616
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer BCBSNC	Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

C.

Full Name (Last, First, Middle Initial) E Ronald Smith		Date of Receipt MM / DD / YYYY 12 / 03 / 2010
Mailing Address 34 Forked Pine Ct		Transaction ID: SA11AI.86572
City Chapel Hill	State NC	Zip Code 27517
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 82.69
Name of Employer BCBSNC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1973.02	

SUBTOTAL of Receipts This Page (optional)	132.69
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 66 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) E Ronald Smith	Date of Receipt MM / DD / YYYY 12 / 17 / 2010
	Mailing Address 34 Forked Pine Ct	Transaction ID: SA11AI.86708
	City State Zip Code Chapel Hill NC 27517	Amount of Each Receipt this Period 82.69
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 2055.71	

B.	Full Name (Last, First, Middle Initial) E Ronald Smith	Date of Receipt MM / DD / YYYY 12 / 30 / 2010
	Mailing Address 34 Forked Pine Ct	Transaction ID: SA11AI.86846
	City State Zip Code Chapel Hill NC 27517	Amount of Each Receipt this Period 82.69
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 2138.40	

C.	Full Name (Last, First, Middle Initial) William Smith	Date of Receipt MM / DD / YYYY 12 / 03 / 2010
	Mailing Address 303 Lynden Valley Court	Transaction ID: SA11AI.86573
	City State Zip Code Cary NC 27519	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 480.00	

SUBTOTAL of Receipts This Page (optional)	185.38
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 78
(check only one)

<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
William Smith

Mailing Address 303 Lynden Valley Court

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.86709

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
William Smith

Mailing Address 303 Lynden Valley Court

City Cary State NC Zip Code 27519

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.86847

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Mark Stinneford

Mailing Address 104 Aborfield Court

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.86575

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 50.00

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 68 / 78
<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mark Stinneford		Date of Receipt	
	Mailing Address 104 Aborfield Court		M M / D D / Y Y Y Y Y 12 / 17 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86711
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		10.00	
Name of Employer BCBSNC		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		250.00		

B.	Full Name (Last, First, Middle Initial) Mark Stinneford		Date of Receipt	
	Mailing Address 104 Aborfield Court		M M / D D / Y Y Y Y Y 12 / 30 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86849
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		10.00	
Name of Employer BCBSNC		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		260.00		

C.	Full Name (Last, First, Middle Initial) Richard Supinski		Date of Receipt	
	Mailing Address 2610 Lochmore Drive		M M / D D / Y Y Y Y Y 12 / 03 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86580
	Raleigh	NC	27608	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		30.00	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		720.00		

SUBTOTAL of Receipts This Page (optional)	▶	50.00
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 69 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Richard Supinski		Date of Receipt	
	Mailing Address 2610 Lochmore Drive		M M / D D / Y Y Y Y Y 12 / 17 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86716
	Raleigh	NC	27608	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		30.00	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00		

B.	Full Name (Last, First, Middle Initial) Richard Supinski		Date of Receipt	
	Mailing Address 2610 Lochmore Drive		M M / D D / Y Y Y Y Y 12 / 30 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86854
	Raleigh	NC	27608	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		30.00	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 780.00		

C.	Full Name (Last, First, Middle Initial) Mrs. Carol Sutton		Date of Receipt	
	Mailing Address 22101 Spring Meadow Dr.		M M / D D / Y Y Y Y Y 12 / 03 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86581
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		52.07	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1249.68		

SUBTOTAL of Receipts This Page (optional)	▶	112.07
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 70 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mrs. Carol Sutton		Date of Receipt	
	Mailing Address 22101 Spring Meadow Dr.		M M / D D / Y Y Y Y Y 12 / 17 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86717
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		52.07	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1301.75		

B.	Full Name (Last, First, Middle Initial) Mrs. Carol Sutton		Date of Receipt	
	Mailing Address 22101 Spring Meadow Dr.		M M / D D / Y Y Y Y Y 12 / 30 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86855
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		52.07	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1353.82		

C.	Full Name (Last, First, Middle Initial) A Cynthia Troxler		Date of Receipt	
	Mailing Address		M M / D D / Y Y Y Y Y 12 / 03 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86583
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
	20.00			
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 480.00		

SUBTOTAL of Receipts This Page (optional)	▶	124.14
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 71 / 78

(check only one)

<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)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

A Cynthia Troxler

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.86719

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

A Cynthia Troxler

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.86857

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Jeanne Wallander

Mailing Address 3404 Bluet Ct

City

State

Zip Code

Holly Springs

NC

27540

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
VP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.86585

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 / 78

(check only one)

<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)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Jeanne Wallander

Mailing Address 3404 Bluet Ct

City State Zip Code
Holly Springs NC 27540

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

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 17 / 2010

Transaction ID: SA11AI.86721

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Jeanne Wallander

Mailing Address 3404 Bluet Ct

City State Zip Code
Holly Springs NC 27540

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

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1040.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 30 / 2010

Transaction ID: SA11AI.86859

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Dionne Wells

Mailing Address 9228 Cornwell Dr

City State Zip Code
Wake Forest NC 27587

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

Name of Employer Occupation
BCBSNC Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 03 / 2010

Transaction ID: SA11AI.86588

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

90.00

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 73 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Dionne Wells		Date of Receipt																					
	Mailing Address 9228 Cornwell Dr		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	7		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		1	7		2	0	1	0														
	City State Zip Code Wake Forest NC 27587		Transaction ID: SA11AI.86724																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00																						
Name of Employer BCBSNC Occupation Manager		Aggregate Year-to-Date ▼ 250.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

B.	Full Name (Last, First, Middle Initial) Dionne Wells		Date of Receipt																					
	Mailing Address 9228 Cornwell Dr		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	0		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		3	0		2	0	1	0														
	City State Zip Code Wake Forest NC 27587		Transaction ID: SA11AI.86862																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00																						
Name of Employer BCBSNC Occupation Manager		Aggregate Year-to-Date ▼ 260.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

C.	Full Name (Last, First, Middle Initial) Kimberly Whiteurs		Date of Receipt																					
	Mailing Address 3008 Cardinal Lake Dr		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	3		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		0	3		2	0	1	0														
	City State Zip Code Durham NC 27704		Transaction ID: SA11AI.86589																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.19																						
Name of Employer BCBSNC Occupation Senior Business Consultant		Aggregate Year-to-Date ▼ 401.20																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

SUBTOTAL of Receipts This Page (optional)	▶	35.19
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 74 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kimberly Whiteurs	Date of Receipt
	Mailing Address 3008 Cardinal Lake Dr	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 12 / 17 / 2010
	City State Zip Code Durham NC 27704	Transaction ID: SA11AI.86725
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 16.87
	Name of Employer BCBSNC Occupation Senior Business Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 418.07	

B.	Full Name (Last, First, Middle Initial) Kimberly Whiteurs	Date of Receipt
	Mailing Address 3008 Cardinal Lake Dr	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 12 / 30 / 2010
	City State Zip Code Durham NC 27704	Transaction ID: SA11AI.86863
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 16.87
	Name of Employer BCBSNC Occupation Senior Business Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 434.94	

C.	Full Name (Last, First, Middle Initial) Mr. James Wilson	Date of Receipt
	Mailing Address 227 Midenhall Way	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 12 / 03 / 2010
	City State Zip Code Cary NC 27513	Transaction ID: SA11AI.86590
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 192.30
	Name of Employer BCBSNC Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 4615.20	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 226.04
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 75 / 78
	<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. James Wilson		Date of Receipt	
	Mailing Address 227 Midenhall Way		M M / D D / Y Y Y Y Y 12 / 17 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86726
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4807.50		

B.	Full Name (Last, First, Middle Initial) Mr. James Wilson		Date of Receipt	
	Mailing Address 227 Midenhall Way		M M / D D / Y Y Y Y Y 12 / 30 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86864
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4999.80		

C.	Full Name (Last, First, Middle Initial) Randy Winslow		Date of Receipt	
	Mailing Address 1609 Valley Creek Drive		M M / D D / Y Y Y Y Y 12 / 03 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.86591
	Hillsborough	NC	27278	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		11.18	
Name of Employer BCBSNC		Occupation Business Analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 265.28		

SUBTOTAL of Receipts This Page (optional)	▶	395.78
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 76 / 78
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Randy Winslow

Mailing Address 1609 Valley Creek Drive

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation Business Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.34

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.86727

Amount of Each Receipt this Period
10.06

B. Full Name (Last, First, Middle Initial)
Randy Winslow

Mailing Address 1609 Valley Creek Drive

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation Business Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 286.52

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.86865

Amount of Each Receipt this Period
11.18

C. Full Name (Last, First, Middle Initial)
Mr. Christopher Woodfin

Mailing Address 100 Palmyra Place

City Chapel Hill State NC Zip Code 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2270.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.86592

Amount of Each Receipt this Period
95.00

SUBTOTAL of Receipts This Page (optional) ► 116.24

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 78
(check only one)

<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin		Date of Receipt
Mailing Address 100 Palmyra Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
City State Zip Code Chapel Hill NC 27514		<input type="text"/> 1 2 / <input type="text"/> 1 7 / <input type="text"/> 2 0 1 0
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Transaction ID: SA11AI.86728
Name of Employer BCBSNC Occupation VP		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 95.00
Aggregate Year-to-Date ▼ <input type="text"/> 2365.50		

B.

Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin		Date of Receipt
Mailing Address 100 Palmyra Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
City State Zip Code Chapel Hill NC 27514		<input type="text"/> 1 2 / <input type="text"/> 3 0 / <input type="text"/> 2 0 1 0
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Transaction ID: SA11AI.86866
Name of Employer BCBSNC Occupation VP		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 95.00
Aggregate Year-to-Date ▼ <input type="text"/> 2460.50		

C.

Full Name (Last, First, Middle Initial) Kenneth Wright		Date of Receipt
Mailing Address 618 S. Wingate Dr.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
City State Zip Code Wake Forest NC 27587		<input type="text"/> 1 2 / <input type="text"/> 0 3 / <input type="text"/> 2 0 1 0
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Transaction ID: SA11AI.86593
Name of Employer BCBSNC Occupation Director		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 41.00
Aggregate Year-to-Date ▼ <input type="text"/> 975.00		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 231.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 78 / 78
	(check only one)	
<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)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kenneth Wright		Date of Receipt
	Mailing Address 618 S. Wingate Dr.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 1 7 / 2 0 1 0
	City	State	Zip Code
	Wake Forest	NC	27587
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.86729
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 41.00
		<input type="text"/> 1016.00	

B.	Full Name (Last, First, Middle Initial) Kenneth Wright		Date of Receipt
	Mailing Address 618 S. Wingate Dr.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 0 / 2 0 1 0
	City	State	Zip Code
	Wake Forest	NC	27587
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.86867
Name of Employer BCBSNC		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 41.00
		<input type="text"/> 1057.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 82.00
TOTAL This Period (last page this line number only)	<input type="text"/> 11018.98