

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Health Care Service Corporation Employees' Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		423545.45
(b) Cash on Hand at Beginning of Reporting Period.....	487154.17	
(c) Total Receipts (from Line 19)	45780.36	275239.08
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	532934.53	698784.53
7. Total Disbursements (from Line 31).....	70000.00	235850.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	462934.53	462934.53
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)

Page 3

Write or Type Committee Name

Health Care Service Corporation Employees' Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	40132.76	177462.06
(ii) Unitemized	5647.60	97777.02
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	45780.36	275239.08
(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)	45780.36	275239.08
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	45780.36	275239.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	45780.36	275239.08

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	43000.00	164500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	27000.00	71350.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	70000.00	235850.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	70000.00	235850.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	45780.36	275239.08
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	45780.36	275239.08
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: PAGE 6 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Health Care Service Corporation Employees' Political Action Committee

A. Michael Patrick Abbene
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Maj/Natl Accts IL DVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : DEA5B4F2C6DF4B53B41A
 Amount of Each Receipt this Period 20.00

B. Michael Patrick Abbene
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Maj/Natl Accts IL DVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : A04AD7581212486EBE02
 Amount of Each Receipt this Period 20.00

C. Seonaid M. Acevedo
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Project Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 6F4C797AF32E49BEA6E1
 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: (check only one)	PAGE 7 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Leslie N. Adkins
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation VP SSD
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : BA998846C868462EA04F
Amount of Each Receipt this Period **20.00**

B. Leslie N. Adkins
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation VP SSD
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 85D4217C040349A9AE7C
Amount of Each Receipt this Period **20.00**

C. Karen A. Aguilar
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Sr Mgr UM Comp & Accred
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 227CB4FE423044E3A5BD
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 8 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Karen A. Aguilar
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr UM Comp & Accred
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : FDAAD3832DA3434284D1
 Amount of Each Receipt this Period 200.00

B. Jane E. Akers
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Actuary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 9CD7488EE9194949BFDB
 Amount of Each Receipt this Period 30.00

C. Jane E. Akers
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Actuary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 4FE21DAA45C047049B6C
 Amount of Each Receipt this Period 30.00

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: (check only one)	PAGE 9 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Cynthia Kaye Al-Aghbary
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Exec Dir Govt Prog Clinical Op
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **455.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 2A018D9F1208416DA878
 Amount of Each Receipt this Period **35.00**

B. Cynthia Kaye Al-Aghbary
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Exec Dir Govt Prog Clinical Op
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **455.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : ED789A8D5A464EA4BA4C
 Amount of Each Receipt this Period **35.00**

C. Scott A. Albosta
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation SW Region Network Perf Mgt DVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **540.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : CF64528826A04E1099F3
 Amount of Each Receipt this Period **45.00**

SUBTOTAL of Receipts This Page (optional)..... **115.00**
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 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Scott A. Albosta
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation SW Region Network Perf Mgt DVP
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **540.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 58812D9BC7B04B8A9B15
Amount of Each Receipt this Period **45.00**

B. Linda L. Amburn
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation VP SSD
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **650.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 94E277A7103F4D61ADEF
Amount of Each Receipt this Period **50.00**

C. Linda L. Amburn
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation VP SSD
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **650.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 99C01DF5FF8A4B568D3A
Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional)..... **145.00**
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 11 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. James P. Ancmon
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Web Application Dev Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : B1A5232DB12849938582

Amount of Each Receipt this Period
 20.00

B. James P. Ancmon
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Web Application Dev Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : EEF095AFB03241DD9510

Amount of Each Receipt this Period
 20.00

C. Nicole E. Antonacci
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Subscriber Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : D9349BCE54B8449FB068

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: (check only one)	PAGE 12 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial) A. Nicole E. Antonacci		Date of Receipt
Mailing Address 300 E. Randolph St		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>
City	State	Zip Code
Chicago	IL	60601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 7FF59EB4EF044778831B
Name of Employer	Occupation	Amount of Each Receipt this Period
Health Care Service Corporation	Sr Mgr Subscriber Services	<input type="text" value="30.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="260.00"/>	

Full Name (Last, First, Middle Initial) B. Ronald K. Aoyama		Date of Receipt
Mailing Address 300 E. Randolph St		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code
Chicago	IL	60601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 9391990E6ECB40DA95F5
Name of Employer	Occupation	Amount of Each Receipt this Period
Health Care Service Corporation	Dir Mid Market Sales	<input type="text" value="30.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="390.00"/>	

Full Name (Last, First, Middle Initial) C. Ronald K. Aoyama		Date of Receipt
Mailing Address 300 E. Randolph St		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>
City	State	Zip Code
Chicago	IL	60601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 5E43186B9118408BB451
Name of Employer	Occupation	Amount of Each Receipt this Period
Health Care Service Corporation	Dir Mid Market Sales	<input type="text" value="30.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="390.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="80.00"/>
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 13 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Michael Gary Apolskis
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation DVP Regul Monitor & Analysis

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **910.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : C0703CA93D1F4C1EA258

Amount of Each Receipt this Period **70.00**

B. Michael Gary Apolskis
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation DVP Regul Monitor & Analysis

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **910.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : CC2E6E9C6D834D0A9DAD

Amount of Each Receipt this Period **70.00**

C. David G. Ashmore
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Plan Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 553BC7CF2837485F9505

Amount of Each Receipt this Period **45.00**

SUBTOTAL of Receipts This Page (optional)..... **185.00**

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 14 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. David G. Ashmore
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Plan Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 329FA233963E46D083BC

Amount of Each Receipt this Period **45.00**

B. Karen M. Atwood
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation President IL Division

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2496.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : CA873AAF947941F5BDC7

Amount of Each Receipt this Period **192.00**

C. Karen M. Atwood
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation President IL Division

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2496.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 3B2E5DF9BDE9437C9C7D

Amount of Each Receipt this Period **192.00**

SUBTOTAL of Receipts This Page (optional)..... **429.00**

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 15 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial) A. Kenneth Avner		Date of Receipt MM / DD / YYYY 06 / 12 / 2015 Transaction ID : 3529CC555F39450A8706
Mailing Address 300 E. Randolph St		Amount of Each Receipt this Period 5000.00
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C	Name of Employer Health Care Service Corporation	Occupation Chief Financial Officer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Brenda L. Bailey		Date of Receipt MM / DD / YYYY 06 / 12 / 2015 Transaction ID : CF96A658B9FA474DB8BE
Mailing Address 300 E. Randolph St		Amount of Each Receipt this Period 115.00
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C	Name of Employer Health Care Service Corporation	Occupation Sub Svcs Div SVP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1495.00	

Full Name (Last, First, Middle Initial) C. Brenda L. Bailey		Date of Receipt MM / DD / YYYY 06 / 26 / 2015 Transaction ID : A82C743287A14A899C87
Mailing Address 300 E. Randolph St		Amount of Each Receipt this Period 115.00
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C	Name of Employer Health Care Service Corporation	Occupation Sub Svcs Div SVP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1495.00	

SUBTOTAL of Receipts This Page (optional).....▶	5230.00
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 16 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Health Care Service Corporation Employees' Political Action Committee

A. Teri L. Bailey
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr HR Bus Integration Solu
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 95897E3BE2B24E35AC2C
 Amount of Each Receipt this Period
 30.00

B. Teri L. Bailey
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr HR Bus Integration Solu
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : ABACB3C679E94C97ABDC
 Amount of Each Receipt this Period
 30.00

C. Ronald J. Balsewich
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP-Corporate Human Resources
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 74A6974C6B11443FA12D
 Amount of Each Receipt this Period
 30.00

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: PAGE 17 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Health Care Service Corporation Employees' Political Action Committee

A. Ronald J. Balsewich
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP-Corporate Human Resources
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 770209DA609C4F178C9D
 Amount of Each Receipt this Period
 30.00

B. Bradley Dean Bare
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Med Policy&Prof Assoc Rel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 4F60D265FD654B2183A9
 Amount of Each Receipt this Period
 30.00

C. Bradley Dean Bare
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Med Policy&Prof Assoc Rel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 04E70645DCC74C6198B2
 Amount of Each Receipt this Period
 30.00

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 18 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Gregory Keith Barnes
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP TX Key Govt and ComrcI Acct
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : E361EF72BA9048F2B2A1
 Amount of Each Receipt this Period
 115.00

B. Gregory Keith Barnes
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP TX Key Govt and ComrcI Acct
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 50927D6EDABE4D758105
 Amount of Each Receipt this Period
 115.00

C. William R. Barnes
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP-General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : C6FCD435F8354E488DCE
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
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 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

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

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP-General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 9D52762F544946D8AACA

Amount of Each Receipt this Period 20.00

B. Erin K. Barney
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Plan Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 8AAE388B41104812BA9A

Amount of Each Receipt this Period 35.00

C. Erin K. Barney
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Plan Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 26 / 2015
Transaction ID : D3D266568A01495FBFB1

Amount of Each Receipt this Period 35.00

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 20 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. James Barone
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir Strategic Sourcing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 129CB7A0269C421FB4A9

Amount of Each Receipt this Period **30.00**

B. James Barone
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir Strategic Sourcing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 5D7F07112B1747948375

Amount of Each Receipt this Period **30.00**

C. Ethan Samuel Baumfeld
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Regulatory Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **955.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 82A087D33842461EA726

Amount of Each Receipt this Period **85.00**

SUBTOTAL of Receipts This Page (optional)..... **145.00**

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 21 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Ethan Samuel Baumfeld
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Regulatory Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **955.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : BC8C3D35E324414B8821
 Amount of Each Receipt this Period **85.00**

B. Darrell D. Beckett
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sales & Marketing TX DSVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1495.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 50A5357E35204F2E90CD
 Amount of Each Receipt this Period **115.00**

C. Darrell D. Beckett
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sales & Marketing TX DSVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1495.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 13C1C0AC891249E1AC85
 Amount of Each Receipt this Period **115.00**

SUBTOTAL of Receipts This Page (optional)..... **315.00**
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 22 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Beth A. Bednarek
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Sr Mgr Application
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 12 / 2015
Transaction ID : CB8352555CB0480EB07B
Amount of Each Receipt this Period 25.00

B. Beth A. Bednarek
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Sr Mgr Application
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 15BF339BA04840F7820E
Amount of Each Receipt this Period 25.00

C. Teresa M. Benner
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Sr Mgr Subscriber Services
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 6EC926BDEA9A45618A9C
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 23 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Teresa M. Benner
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Subscriber Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 977AF58354B9438EA130

Amount of Each Receipt this Period **200.00**

B. J. Steven Berry
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir Facility Support

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 712AF5C45F7D44C8A854

Amount of Each Receipt this Period **30.00**

C. J. Steven Berry
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir Facility Support

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 6A79D4F2A73746B1AFB2

Amount of Each Receipt this Period **30.00**

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: (check only one)	PAGE 24 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Health Care Service Corporation Employees' Political Action Committee

A. Steve Betts
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation SVP Chief Information Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **384.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 1036A94143BD44F0971F
 Amount of Each Receipt this Period
192.00

B. Terry W. Bevins
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Small Grp Underwriting
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 19A49B2336CB4DE88A19
 Amount of Each Receipt this Period
30.00

C. Terry W. Bevins
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Small Grp Underwriting
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : A2449E94BEDC42EEAA29
 Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional).....	252.00
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 25 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial) A. Beverly Binkowski		Date of Receipt MM / DD / YYYY 06 / 12 / 2015 Transaction ID : 0A5958DFB20448D794DA
Mailing Address 300 E. Randolph St		Amount of Each Receipt this Period 30.00
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C		
Name of Employer Health Care Service Corporation	Occupation DVP OK Govt Rel & Public Aff	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name (Last, First, Middle Initial) B. Beverly Binkowski		Date of Receipt MM / DD / YYYY 06 / 26 / 2015 Transaction ID : 0460E1DC4EFD4CC287FD
Mailing Address 300 E. Randolph St		Amount of Each Receipt this Period 30.00
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C		
Name of Employer Health Care Service Corporation	Occupation DVP OK Govt Rel & Public Aff	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name (Last, First, Middle Initial) C. Sterling E. Blackmon		Date of Receipt MM / DD / YYYY 06 / 12 / 2015 Transaction ID : 9C0535A95F914E3890BE
Mailing Address 300 E. Randolph St		Amount of Each Receipt this Period 30.00
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C		
Name of Employer Health Care Service Corporation	Occupation Sup Desktop Operations	
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).....	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 26 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Sterling E. Blackmon
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sup Desktop Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 5B39E457E9004C2093B1
 Amount of Each Receipt this Period
 30.00

B. Pamela E. Bland
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Labor Account Exec II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 4CD2649924CB40E1B4A5
 Amount of Each Receipt this Period
 20.00

C. Pamela E. Bland
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Labor Account Exec II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 57A2B804CBFE48548AE1
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 27 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial) A. James C. Blizzard		Date of Receipt
Mailing Address 300 E. Randolph St		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code
Chicago	IL	60601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 58C37F4E6F8247698A83
Name of Employer	Occupation	Amount of Each Receipt this Period
Health Care Service Corporation	Systems Software Prog Consult	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="325.00"/>	

Full Name (Last, First, Middle Initial) B. James C. Blizzard		Date of Receipt
Mailing Address 300 E. Randolph St		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>
City	State	Zip Code
Chicago	IL	60601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : BDE38032484F4A15AFB7
Name of Employer	Occupation	Amount of Each Receipt this Period
Health Care Service Corporation	Systems Software Prog Consult	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="325.00"/>	

Full Name (Last, First, Middle Initial) C. Jackson L. Boen		Date of Receipt
Mailing Address 300 E. Randolph St		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code
Chicago	IL	60601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : DA6A64336792461C8DB9
Name of Employer	Occupation	Amount of Each Receipt this Period
Health Care Service Corporation	Sub Svcs Div SVP	<input type="text" value="115.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1110.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="165.00"/>
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 28 OF 254
	<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	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Jackson L. Boen
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sub Svcs Div SVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1110.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 060D11CD48F843A29DD4

Amount of Each Receipt this Period 115.00

B. Nancy E. Bond
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP SSD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt 06 / 12 / 2015
Transaction ID : B3F88D059DBE46909388

Amount of Each Receipt this Period 45.00

C. Nancy E. Bond
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP SSD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt 06 / 26 / 2015
Transaction ID : D1AB8DAE56234BA78A92

Amount of Each Receipt this Period 45.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 205.00

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 29 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Deborah Lynn Boroughs
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Clinical Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : B7CE8A35AFC0425F92B8
 Amount of Each Receipt this Period **20.00**

B. Deborah Lynn Boroughs
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Clinical Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 18068F5547EA47DABEDB
 Amount of Each Receipt this Period **20.00**

C. Vickie L. Bowers
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Grp Hlth Undwtr
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 1C3A1555012743B78BB4
 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: (check only one)	PAGE 30 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Health Care Service Corporation Employees' Political Action Committee

A. Vickie L. Bowers
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Grp Hlth Undwtr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : E5CFDB272DAE4029998A
 Amount of Each Receipt this Period
 20.00

B. Karen Brach
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : C44172688BDF4A42B7D8
 Amount of Each Receipt this Period
 25.00

C. Karen Brach
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : 3AEDDBC6445D46ED991A
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 31 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Deanne Braksator
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Product Dev & Mgt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 12 / 2015
Transaction ID : C1CFFF1DBAFC48CF91F8
 Amount of Each Receipt this Period 35.00

B. Deanne Braksator
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Product Dev & Mgt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 0943B364CCBC4CBCA616
 Amount of Each Receipt this Period 35.00

C. Charles L. Brashers
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Application
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 8B2A4463BC9C4EAB92AD
 Amount of Each Receipt this Period 20.00

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 32 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Charles L. Brashers
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Application
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 452BE9290CC34719944E
 Amount of Each Receipt this Period
 20.00

B. Lori A. Breaux
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Unit Mgr Prof Provider Network
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : ED3674DF5BD44C39BA30
 Amount of Each Receipt this Period
 20.00

C. Lori A. Breaux
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Unit Mgr Prof Provider Network
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 585E86EBF16F42E1B8EE
 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: (check only one)	PAGE 33 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Peter A. Briedis
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Systems Software Prog Consult

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : EDBA46962CDA4EA59192

Amount of Each Receipt this Period **30.00**

B. Peter A. Briedis
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Systems Software Prog Consult

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 4B7076318A9646179F61

Amount of Each Receipt this Period **30.00**

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

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation DVP Sales Delivery Group

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **455.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 5FE03759504449FD9882

Amount of Each Receipt this Period **35.00**

SUBTOTAL of Receipts This Page (optional)..... **95.00**

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 34 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)
A. James R. Brown

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation DVP Sales Delivery Group

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **455.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 099C2CE9C0024BDC89BB

Amount of Each Receipt this Period **35.00**

Full Name (Last, First, Middle Initial)
B. Debbie K. Brumley

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Account Executive III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 5CEE1B35AD7249CDB7C3

Amount of Each Receipt this Period **25.00**

Full Name (Last, First, Middle Initial)
C. Elevene M. Bryant

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP SSD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : DB155B5B25BC496DB5AB

Amount of Each Receipt this Period **45.00**

SUBTOTAL of Receipts This Page (optional)..... **105.00**

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 35 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Elevene M. Bryant
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP SSD
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **585.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 8EC9D55C5763464AB8F9
 Amount of Each Receipt this Period **45.00**

B. Christopher W. Buley
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation DVP Government Programs Course
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1030.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 52138229B9854179AAD4
 Amount of Each Receipt this Period **85.00**

c. Christopher W. Buley
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation DVP Government Programs Course
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1030.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : BE074503838C4247A7BF
 Amount of Each Receipt this Period **85.00**

SUBTOTAL of Receipts This Page (optional)..... **215.00**
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 36 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Health Care Service Corporation Employees' Political Action Committee

A. Marion E. Burchell
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Dept Strategy & Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 74BC7A48B7034E86AF71
 Amount of Each Receipt this Period
 30.00

B. Marion E. Burchell
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Dept Strategy & Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 52AF787A9FAF4B62A245
 Amount of Each Receipt this Period
 30.00

C. Mary J. Burfeind
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP-Corporate Human Resources
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 61D86F4717074E6EA09D
 Amount of Each Receipt this Period
 45.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00
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 37 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Mary J. Burfeind
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP-Corporate Human Resources
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **585.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 0383BE6F47B34118815D
 Amount of Each Receipt this Period **45.00**

B. Donald M. Burke
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Maj/Nat Principal Account Exec
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : E121A3DA17374F3F8022
 Amount of Each Receipt this Period **30.00**

C. Donald M. Burke
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Maj/Nat Principal Account Exec
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 83AF77E3A5B7447FB97B
 Amount of Each Receipt this Period **30.00**

SUBTOTAL of Receipts This Page (optional)..... **105.00**
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 38 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Kelly H. Butler
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Chief of Staff Texas Division
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **360.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 39A4D231C8A84E6DB9BE
Amount of Each Receipt this Period **70.00**

B. Kelly H. Butler
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Chief of Staff Texas Division
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **360.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : DE99D65EC9D8443A8ADD
Amount of Each Receipt this Period **70.00**

C. Brenda L. Byrd
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Business Systems Specialist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **280.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : C94B6217B12D4BCD9770
Amount of Each Receipt this Period **30.00**

SUBTOTAL of Receipts This Page (optional)..... **170.00**
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 39 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Brenda L. Byrd
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Business Systems Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 06 / 26 / 2015
Transaction ID : E39556D7FC7747E5A7AD

Amount of Each Receipt this Period 30.00

B. Lisa L. Byrd
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Dir Product Mktg Comm

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 660AC02AB2A7436E8F75

Amount of Each Receipt this Period 30.00

C. Lisa L. Byrd
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Dir Product Mktg Comm

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 057F6CE24EB34864A5F9

Amount of Each Receipt this Period 30.00

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 40 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Theresa A. Calderon
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Underwriting TX

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt
06 / 12 / 2015
Transaction ID : 55AF81EF97364524B57D

Amount of Each Receipt this Period
45.00

B. Theresa A. Calderon
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Underwriting TX

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt
06 / 26 / 2015
Transaction ID : 87BBEC8154634094858A

Amount of Each Receipt this Period
45.00

C. Jack M. Campbell, Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Exec Dir Provider Analytics

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **455.00**

Date of Receipt
06 / 12 / 2015
Transaction ID : D8A31ADC0A6242C3A69C

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... **125.00**

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 41 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Jack M. Campbell, Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Exec Dir Provider Analytics

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 26 / 2015
Transaction ID : **C1BAF47C99774EE3BD1C**

Amount of Each Receipt this Period 35.00

B. John Cannon
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation EVP & Chief Admin Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2496.00

Date of Receipt 06 / 12 / 2015
Transaction ID : **CDAC4A1C29DF4FBEB446**

Amount of Each Receipt this Period 192.00

C. John Cannon
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation EVP & Chief Admin Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2496.00

Date of Receipt 06 / 26 / 2015
Transaction ID : **4A4AF1383B1F4DC6817E**

Amount of Each Receipt this Period 192.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 419.00

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 42 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Justin M. Capp
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Sales Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : D3E0836581A4451DA7B1
 Amount of Each Receipt this Period
 20.00

B. Justin M. Capp
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Sales Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : A84B365DB0704931B180
 Amount of Each Receipt this Period
 20.00

c. Mary K. Carter
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Government Relations Spec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : EDEB3AC16CFD49F7BC0F
 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: (check only one)	PAGE 43 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Mary K. Carter
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Government Relations Spec
 Receipt For: Primary General Other (specify)

Date of Receipt
 06 / 26 / 2015
Transaction ID : 489248EC91DD464AA6D7
 Amount of Each Receipt this Period
 200.00
 Aggregate Year-to-Date ▼
 260.00

B. Vincent Carter
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Procurement Contract
 Receipt For: Primary General Other (specify)

Date of Receipt
 06 / 12 / 2015
Transaction ID : 58416F0965654C9B947C
 Amount of Each Receipt this Period
 50.00
 Aggregate Year-to-Date ▼
 650.00

C. Vincent Carter
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Procurement Contract
 Receipt For: Primary General Other (specify)

Date of Receipt
 06 / 26 / 2015
Transaction ID : 91C351EC8CDF424F8A39
 Amount of Each Receipt this Period
 50.00
 Aggregate Year-to-Date ▼
 650.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
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 44 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Kevin M. Cassidy
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation DSVP Illinois Markets
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1649.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 5CC8409DF1CB49C39EFC
 Amount of Each Receipt this Period 192.00

B. Kevin M. Cassidy
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation DSVP Illinois Markets
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1649.00

Date of Receipt 06 / 26 / 2015
Transaction ID : F1CA3098C9E440D29072
 Amount of Each Receipt this Period 192.00

C. Christian Caverly
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Workforce
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : BD7ED89E6C5347348F33
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 404.00
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 45 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Christian Caverly
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Mgr Workforce
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 8C46DC6D45904435812C
Amount of Each Receipt this Period 20.00

B. Allan Joel Chernov
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Med Dir Medical Policy & QI
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 6F63A558F8CE4C0D9806
Amount of Each Receipt this Period 25.00

C. Allan Joel Chernov
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Med Dir Medical Policy & QI
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 3DA120F0A1B445929AE4
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 46 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Beatrice M. Cisneros
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Business Technical Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : D6AD34401C814A759763
 Amount of Each Receipt this Period
 20.00

B. Beatrice M. Cisneros
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Business Technical Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 020DB0F7A6FD4B08930B
 Amount of Each Receipt this Period
 20.00

C. Kristin E. Conley
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Customer Lifecycle Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1105.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 9C37D56856C545CEBAD9
 Amount of Each Receipt this Period
 85.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 47 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Kristin E. Conley
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Customer Lifecycle Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1105.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : FC5D34E5810D4190ACBC
 Amount of Each Receipt this Period
 85.00

B. Kerrie A. Cook
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Maj/Nat Strategic Acct Exec II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 2431DC64309E4C4CAA27
 Amount of Each Receipt this Period
 20.00

C. Kerrie A. Cook
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Maj/Nat Strategic Acct Exec II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 671754C9AAF14454BBD5
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 48 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Steven M. Cooley
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Exec Dir Mkt Research&Analytic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : FF7103A97C244A4BB384

Amount of Each Receipt this Period **45.00**

B. Steven M. Cooley
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Exec Dir Mkt Research&Analytic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 3FC96845EA6B4CDDA5F9

Amount of Each Receipt this Period **45.00**

C. Rochelle Cortez
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 6480D46776254FB89A8B

Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... **110.00**

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 49 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Rochelle Cortez
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : D8397332236F4682BEE5
 Amount of Each Receipt this Period
 20.00

B. Marina Angelica Coryat
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Media & Community Rels
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 14B22F3616A34870BF09
 Amount of Each Receipt this Period
 25.00

c. Marina Angelica Coryat
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Media & Community Rels
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : B6633ECFDC114CFE907B
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 50 OF 254
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Francis G. Cote
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation VP Montana Sales
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1105.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 5AD9F1C04FD9452DBB68
Amount of Each Receipt this Period 85.00

B. Francis G. Cote
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation VP Montana Sales
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1105.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 5732347AF69A422C9975
Amount of Each Receipt this Period 85.00

C. Lisa M. Couwenhoven
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Dir IT Internal Planning/Ops
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 12 / 2015
Transaction ID : B3CDEFC6194B4F49A2F0
Amount of Each Receipt this Period 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 205.00
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 51 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Lisa M. Couwenhoven
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir IT Internal Planning/Ops
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **455.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : A490BECA9C2E417894F3
 Amount of Each Receipt this Period **35.00**

B. Arlena M. Crane
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Enterprise Custom Group
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 21213A87E3FF4EFC8B61
 Amount of Each Receipt this Period **20.00**

C. Arlena M. Crane
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Enterprise Custom Group
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : CD6B005162DA4FF0ACD9
 Amount of Each Receipt this Period **20.00**

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 52 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial) A. Geoffrey F Credi			Date of Receipt
Mailing Address 300 E. Randolph St			<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : 4D33E327DCA148F59242
Chicago	IL	60601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Health Care Service Corporation	Sr Mgr Facilities Operations		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="260.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Geoffrey F Credi			Date of Receipt
Mailing Address 300 E. Randolph St			<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : 38CE48ED989E4CC59AFA
Chicago	IL	60601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Health Care Service Corporation	Sr Mgr Facilities Operations		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="260.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Joseph Robert Cunningham			Date of Receipt
Mailing Address 300 E. Randolph St			<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : 87C61B32FED8444EBA11
Chicago	IL	60601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="115.00"/>
Name of Employer	Occupation		
Health Care Service Corporation	VP & Chief Medical Officer-OK		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1495.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="155.00"/>
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 53 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Joseph Robert Cunningham
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP & Chief Medical Officer-OK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1495.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : BBF2B69A9C024E9AB96D
 Amount of Each Receipt this Period
 115.00

B. Derek M. Dattner
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Provider Affairs Operation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : CBF7A491EC994BCCBDCF
 Amount of Each Receipt this Period
 20.00

C. Derek M. Dattner
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Provider Affairs Operation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 9B96F4B3E2B04E4E8478
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....	155.00
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 54 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Gregory B. Davis
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Actuary III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 12 / 2015
Transaction ID : AD3DE17B16634AD2BD2C
 Amount of Each Receipt this Period 35.00

B. Gregory B. Davis
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Actuary III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 86E1F772A64640328089
 Amount of Each Receipt this Period 35.00

C. Jeff Davis
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Programmer Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 68928C03877D43B99098
 Amount of Each Receipt this Period 20.00

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 55 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Jeff Davis
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Programmer Analyst
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : A7C72580D8D44ADC981F
Amount of Each Receipt this Period **200.00**

B. Carolyn L. Dawson
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation SVP Enterprise Hlth Care Mgmt
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **2496.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : EDC2571CB22B4F2AB497
Amount of Each Receipt this Period **192.00**

C. Carolyn L. Dawson
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation SVP Enterprise Hlth Care Mgmt
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **2496.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : F12C85B52E994EE592F5
Amount of Each Receipt this Period **192.00**

SUBTOTAL of Receipts This Page (optional)..... **404.00**
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 56 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Laura J. Day
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir Enterprise QI & Accredited

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : B905C48A476B47A5AB0D

Amount of Each Receipt this Period 20.00

B. Laura J. Day
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir Enterprise QI & Accredited

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : FA8756B0FB044ACBBB2A

Amount of Each Receipt this Period 20.00

C. Jose J. De La Rosa
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Dir Corporate Strategy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 12 / 2015
Transaction ID : F41C445C30A342628729

Amount of Each Receipt this Period 35.00

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 57 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Jose J. De La Rosa
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Corporate Strategy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 26 / 2015
Transaction ID : F3575C6A605A40A8A8D1
 Amount of Each Receipt this Period 35.00

B. Michael Joseph Deering
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Media & Public Rel-IL Div
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 12 / 2015
Transaction ID : C3EB43A156BA4FF9A90B
 Amount of Each Receipt this Period 30.00

C. Michael Joseph Deering
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Media & Public Rel-IL Div
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 3CF1E32BF05746A3AC1C
 Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
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 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Anne E. Delozier
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir Corporate Travel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 60D89F950CC14C6A9C73

Amount of Each Receipt this Period 20.00

B. Anne E. Delozier
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir Corporate Travel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : F4DA65A3D8B849819964

Amount of Each Receipt this Period 20.00

C. Nataraju Devaguptapu
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir ITG Applications

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 54A49F4125C048ABB84B

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: (check only one)	PAGE 59 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Nataraju Devaguptapu
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir ITG Applications
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : DAE2E7BBC9014381BB47
 Amount of Each Receipt this Period **20.00**

B. James A. Devlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Application Architect Consult
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : ABEA0C4F5F624D96AA8A
 Amount of Each Receipt this Period **20.00**

C. James A. Devlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Application Architect Consult
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 8D7A49333DA14536BFB0
 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 60 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Bryan A. Doerstling
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP SSD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 6833EEE75668418992E7
 Amount of Each Receipt this Period 45.00

B. Bryan A. Doerstling
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP SSD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 43CB47C623FD43069F0C
 Amount of Each Receipt this Period 45.00

C. Robert M. Dorrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Govt & Reg Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 45E31D8B64594C6CA45B
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 61 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Robert M. Dorrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Govt & Reg Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : C60D5E0D55434EA5BB89
 Amount of Each Receipt this Period 20.00

B. Thomas J. Douglas
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Client Technology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 06106E36773344209C3B
 Amount of Each Receipt this Period 20.00

C. Thomas J. Douglas
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Client Technology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : E3BC0C9BD87743C2BA86
 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: (check only one)	PAGE 62 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Kimberlee A. Doyle
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Maj/Nat Account Exec III

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 82F52ED180DE48F0ACC3

Amount of Each Receipt this Period 20.00

B. Kimberlee A. Doyle
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Maj/Nat Account Exec III

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 93BB9B2870ED4010AAEB

Amount of Each Receipt this Period 20.00

c. Mary Theresa Doyle
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation DSVP&Chief Govt Relations Off

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2496.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 409C5C18EE9F494BAAD9

Amount of Each Receipt this Period 192.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 232.00

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 63 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial) A. Mary Theresa Doyle		Date of Receipt
Mailing Address 300 E. Randolph St		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 0EF22DCF81D8421BAA75
Name of Employer Health Care Service Corporation	Occupation DSVP&Chief Govt Relations Off	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="192.00"/>
	<input type="text" value="2496.00"/>	

Full Name (Last, First, Middle Initial) B. Samuel G. Drone		Date of Receipt
Mailing Address 300 E. Randolph St		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : C756B59550F1433F9D8A
Name of Employer Health Care Service Corporation	Occupation Dir Budgets & Analytics	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="20.00"/>
	<input type="text" value="260.00"/>	

Full Name (Last, First, Middle Initial) C. Samuel G. Drone		Date of Receipt
Mailing Address 300 E. Randolph St		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 1EF8DA2ABC104A55B795
Name of Employer Health Care Service Corporation	Occupation Dir Budgets & Analytics	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="20.00"/>
	<input type="text" value="260.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="232.00"/>
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 64 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Augustus C. Edmunds
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP-General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **585.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : AE2271F1333B46DE8AC2
 Amount of Each Receipt this Period **45.00**

B. Augustus C. Edmunds
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP-General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **585.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 0E4EA783AE0A4CE19DDF
 Amount of Each Receipt this Period **45.00**

C. Melinda S. Elderkin
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Clinical Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 36662378BA884AECBE7A
 Amount of Each Receipt this Period **30.00**

SUBTOTAL of Receipts This Page (optional)..... **120.00**
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 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Health Care Service Corporation Employees' Political Action Committee

A. Melinda S. Elderkin
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Clinical Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 26 / 2015
Transaction ID : DFF1A629009B45929EB2
 Amount of Each Receipt this Period 30.00

B. Gloria Eldridge
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1830.79

Date of Receipt 06 / 12 / 2015
Transaction ID : 327DC4C700424DCF9F9E
 Amount of Each Receipt this Period 100.00

C. Gregory E. Else
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Sales Strategy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 989BCB4DDD1A4EFCA9D2
 Amount of Each Receipt this Period 20.00

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: (check only one)	PAGE 66 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Gregory E. Else
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Sales Strategy
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 0DA1F4AEA8794C7E8979
 Amount of Each Receipt this Period 200.00

B. Lynn Cantliffe Etchart
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Chief of Staff MT Division
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 390.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 41D1E26BB8254BAE90B1
 Amount of Each Receipt this Period 30.00

C. Lynn Cantliffe Etchart
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Chief of Staff MT Division
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 390.00

Date of Receipt 06 / 26 / 2015
Transaction ID : C473AE867C4D4C3082C7
 Amount of Each Receipt this Period 30.00

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 67 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Cathy G. Evans
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sup Application
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : A5CBB9FAF2E049D59CDC
 Amount of Each Receipt this Period
 20.00

B. Cathy G. Evans
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sup Application
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : E8B681C964DE40C9805A
 Amount of Each Receipt this Period
 20.00

c. Sharon C. Fahlberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Corporate Compliance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 9B94DE2A118D488A8D52
 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: (check only one)	PAGE 68 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Sharon C. Fahlberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Corporate Compliance
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : BA6C7239991E48B79524
 Amount of Each Receipt this Period **20.00**

B. Robert G. Falati
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Business Intelligence Spec
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : D01F22D5D7034802949E
 Amount of Each Receipt this Period **20.00**

C. Robert G. Falati
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Business Intelligence Spec
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : F3C3DCB5A99F461F848D
 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: (check only one)	PAGE 69 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Joel M. Farran
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation DSVP Strategy Corp Relations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3946.41

Date of Receipt 06 / 12 / 2015
Transaction ID : F6C2BDAECAEE4DEB8D3
Amount of Each Receipt this Period 303.57

B. Joel M. Farran
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation DSVP Strategy Corp Relations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3946.41

Date of Receipt 06 / 26 / 2015
Transaction ID : 29B5073943A84AFBB39E
Amount of Each Receipt this Period 303.57

C. Jill S. Firch
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation VP Individual Mkt Operations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1105.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 668D8374A30F456AAFC0
Amount of Each Receipt this Period 85.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 692.14
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 70 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Jill S. Firch
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Individual Mkt Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1105.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 8911A0A320224E6F910F
 Amount of Each Receipt this Period 85.00

B. Peter G. Fischer
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation DVP Retail Programs Oversight
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : ED5E45EA21EF4440AD32
 Amount of Each Receipt this Period 20.00

C. Peter G. Fischer
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation DVP Retail Programs Oversight
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 283A7D0491664A96A112
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 71 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial) A. Matthew Christian Fontana		Date of Receipt
Mailing Address 300 E. Randolph St		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code
Chicago	IL	60601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4C30585C3D8E48F29C8F
Name of Employer Health Care Service Corporation		Amount of Each Receipt this Period
Occupation VP & Chief Med Officer Pharmacy		<input type="text" value="115.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1495.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Matthew Christian Fontana		Date of Receipt
Mailing Address 300 E. Randolph St		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>
City	State	Zip Code
Chicago	IL	60601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 10876D4DD2D54E0F9430
Name of Employer Health Care Service Corporation		Amount of Each Receipt this Period
Occupation VP & Chief Med Officer Pharmacy		<input type="text" value="115.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1495.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Michael E. Frank		Date of Receipt
Mailing Address 300 E. Randolph St		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code
Chicago	IL	60601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 94974432BB414465A1A9
Name of Employer Health Care Service Corporation		Amount of Each Receipt this Period
Occupation President MT Division		<input type="text" value="192.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2496.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="422.00"/>
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 72 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)
A. Michael E. Frank
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation President MT Division
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2496.00

Date of Receipt 06 / 26 / 2015
Transaction ID : B4CD8C90A38A4ABD9F38
 Amount of Each Receipt this Period 192.00

Full Name (Last, First, Middle Initial)
B. Thomas C. Frock
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Exec Dir HR Strategic Bus Part
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 12 / 2015
Transaction ID : D2F7A7EDBF264FEAA88D
 Amount of Each Receipt this Period 70.00

Full Name (Last, First, Middle Initial)
C. Thomas C. Frock
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Exec Dir HR Strategic Bus Part
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 874D320FFAF64E03A88B
 Amount of Each Receipt this Period 70.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 332.00
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 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Health Care Service Corporation Employees' Political Action Committee

A. Deborah Gage
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation President & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2496.00**

Date of Receipt **06 / 15 / 2015**
Transaction ID : D173DDDA9B17417E813D
 Amount of Each Receipt this Period **208.00**

B. Deborah Gage
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation President & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2496.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : A38D201FD60546FB815D
 Amount of Each Receipt this Period **208.00**

C. Ian G. Galton
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Health Care Mgmt Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **585.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 02A3C2CE59FA460EB039
 Amount of Each Receipt this Period **45.00**

SUBTOTAL of Receipts This Page (optional)..... **461.00**
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 74 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Ian G. Galton
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Health Care Mgmt Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 47B8C9096DEF42B588CD

Amount of Each Receipt this Period **45.00**

B. John N. Gavin
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Transaction Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1105.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 47350376A3D5415089F6

Amount of Each Receipt this Period **85.00**

C. John N. Gavin
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Transaction Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1105.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 59A930CADEA84CFE831B

Amount of Each Receipt this Period **85.00**

SUBTOTAL of Receipts This Page (optional)..... **215.00**

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 75 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Tami Geroski
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation VP Compliance
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **455.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 211781757A964E7B8A95
Amount of Each Receipt this Period **35.00**

B. Tami Geroski
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation VP Compliance
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **455.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 4FF4B6D2E3894C7B9FCB
Amount of Each Receipt this Period **35.00**

C. Clinton C. Giese
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Sr Mgr Product Mktg Comm
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **390.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 39B22259CABB4A08A78D
Amount of Each Receipt this Period **30.00**

SUBTOTAL of Receipts This Page (optional)..... **100.00**
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 76 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Clinton C. Giese
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Product Mktg Comm
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 63FD977B6A514F0B937E
 Amount of Each Receipt this Period **300.00**

B. John P. Gleason
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP & Chief of Staff to CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2496.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : C79F09F6A162482985B9
 Amount of Each Receipt this Period **192.00**

C. John P. Gleason
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP & Chief of Staff to CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2496.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 1FED31841EB74577A550
 Amount of Each Receipt this Period **192.00**

SUBTOTAL of Receipts This Page (optional)..... **414.00**
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 77 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Joshua Goldberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Exec Dir Hlth Policy Priv Mkts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 14B8805A33AA4DB8B729
 Amount of Each Receipt this Period 35.00

B. Joshua Goldberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Exec Dir Hlth Policy Priv Mkts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 3D56BC418CDF4F70B2C8
 Amount of Each Receipt this Period 35.00

C. Victor R. Gomez
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Procurement Contract
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 4336F486D6CA4D45935E
 Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
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 78 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Victor R. Gomez
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Procurement Contract
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 25945369241E45ACBA84
 Amount of Each Receipt this Period
30.00

B. Walter D. Goodnight
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Medicaid Rpt & Comp
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 735E2F2F5CDA4D92A666
 Amount of Each Receipt this Period
20.00

C. Walter D. Goodnight
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Medicaid Rpt & Comp
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 549E534840B24248BF15
 Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... **70.00**
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 79 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. James David Goodson
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Enterprise Medicare

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 8D8777F1806B43CBA719

Amount of Each Receipt this Period **60.00**

B. James David Goodson
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Enterprise Medicare

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : D42BD011E73A4E4DB41B

Amount of Each Receipt this Period **60.00**

C. Kimberly Ann Green
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Govt Prog Compliance Off

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 35E83702FEE8443E87CC

Amount of Each Receipt this Period **30.00**

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 80 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Kimberly Ann Green
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Govt Prog Compliance Off
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 6886C8B122894531A1AF
 Amount of Each Receipt this Period
 30.00

B. Tina Y. Green
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sup Application-Web
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 55A3170A1A344C0FB9D7
 Amount of Each Receipt this Period
 20.00

C. Tina Y. Green
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sup Application-Web
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : A8D55776454E432D947F
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 81 OF 254
(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)
Health Care Service Corporation Employees' Political Action Committee

A. Stephania Grober
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Sr Dir Sales
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 50BAF03619BE4B0F8A8E
Amount of Each Receipt this Period **200.00**

B. Stephania Grober
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Sr Dir Sales
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 4C45A93026374F4A9EC6
Amount of Each Receipt this Period **200.00**

C. Anna H Gross
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Enterprise Appl Integ Consult
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **390.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 5D66DA5053194271BCEF
Amount of Each Receipt this Period **30.00**

SUBTOTAL of Receipts This Page (optional)..... **70.00**
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 83 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Maged A. Guirguis
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sup Network-ENS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 2B642983B93C4CA5AE85
 Amount of Each Receipt this Period 20.00

B. Maged A. Guirguis
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sup Network-ENS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 11E3B17D9D2C48C6A46B
 Amount of Each Receipt this Period 20.00

C. Laurie L. Hamic
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr System Pricing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 12 / 2015
Transaction ID : F5F7AFF88B5C4746938F
 Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 84 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Laurie L. Hamic
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr System Pricing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 0ECB430AE8EE4540BCF1
 Amount of Each Receipt this Period 300.00

B. Steven R Hamlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Exec Dir Sales Strategy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 47857E6FCE834EF3916B
 Amount of Each Receipt this Period 100.00

C. Steven R Hamlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Exec Dir Sales Strategy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 52E9BD7D871F410F83B4
 Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00
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 85 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Stephen F. Hamman
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation DSV Provider Services IL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **780.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : E0CE6B08ED204A9A8E8C
 Amount of Each Receipt this Period **60.00**

B. Stephen F. Hamman
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation DSV Provider Services IL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **780.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 750642CA13E04274B54E
 Amount of Each Receipt this Period **60.00**

C. Leigh Ann Hancock
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Subscriber Services
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 9B70F064F7AC4F0D931B
 Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... **140.00**
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 86 OF 254
	<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	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Leigh Ann Hancock
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Sr Mgr Subscriber Services
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 5DCE0C4622E046EC9CA2
Amount of Each Receipt this Period 20.00

B. Cynthia G Hansen
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Sr Mgr Project Management
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 0380628B49D746D18FBD
Amount of Each Receipt this Period 20.00

C. Cynthia G Hansen
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Sr Mgr Project Management
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 9D35738F9A3A40C89C04
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 87 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Jerry E Harbaugh
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Actuarial Systems
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 6A0F24A484214C5D8C6F
 Amount of Each Receipt this Period
 30.00

B. Jerry E Harbaugh
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Actuarial Systems
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 55DE3EDA17884E17886C
 Amount of Each Receipt this Period
 30.00

C. Dean C. Haverkamp
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Lead Systems Architect Consult
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 819B11538F1C45798ABD
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
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 88 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Dean C. Haverkamp
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Lead Systems Architect Consult

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 39DA4C3475C544A0B7D1

Amount of Each Receipt this Period **40.00**

B. Michael Ted Haynes
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation President OK Division

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2496.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 5407867543624C148808

Amount of Each Receipt this Period **192.00**

C. Michael Ted Haynes
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation President OK Division

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2496.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 0276A8B1381B41AB8765

Amount of Each Receipt this Period **192.00**

SUBTOTAL of Receipts This Page (optional)..... **424.00**

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 89 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)
A. Kathryn E. Hedke

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Actuary III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **455.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : 1D09462351134D1EBB62

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
B. Kathryn E. Hedke

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Actuary III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **455.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : 5E555A3DC0514FA4B94B

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
C. Peter A. Hellstrom

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Underwriting IL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : C0084154B64F48F09A91

Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **115.00**

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 90 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Peter A. Hellstrom
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Underwriting IL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt
06 / 26 / 2015
Transaction ID : 1E19521ACBA64DF29CAF

Amount of Each Receipt this Period
45.00

B. Patricia A. Hemingway
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4550.00**

Date of Receipt
06 / 12 / 2015
Transaction ID : F0ECA5FD03C84AF48B34

Amount of Each Receipt this Period
350.00

C. Patricia A. Hemingway
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4550.00**

Date of Receipt
06 / 26 / 2015
Transaction ID : 9FD68F2A6F6346ACA25B

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional)..... **745.00**

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 91 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. James Warren Hendricks
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Medical Director II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : FE19A3072EBD4DBBAC32

Amount of Each Receipt this Period **45.00**

B. James Warren Hendricks
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Medical Director II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 6C26A408E5284CF8AD5E

Amount of Each Receipt this Period **45.00**

C. Julie A. Henry
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Product Development Consult

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : CB07ACABA525471199AC

Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... **110.00**

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 92 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Julie A. Henry
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Product Development Consult
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : C4CD1E71520C4533A1A0
 Amount of Each Receipt this Period
 20.00

B. Scott A. Hilgemann
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Chief Underwriter DSVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 8F63EBC9892F440081C6
 Amount of Each Receipt this Period
 20.00

C. Scott A. Hilgemann
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Chief Underwriter DSVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 83678A8FD54F46789701
 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: (check only one)	PAGE 93 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Robert T. Hill
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Application Developmnt Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 8AA7F7AA9B084D9ABFFE

Amount of Each Receipt this Period 20.00

B. Robert T. Hill
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Application Developmnt Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 69030B7429E24E809383

Amount of Each Receipt this Period 20.00

C. Kathleen M Hocking
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Ld Web Mktg Communication Cons

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : B00D98FD2C414F33A1C2

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: (check only one)	PAGE 94 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Kathleen M Hocking
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Ld Web Mktg Communication Cons
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 1909481263B84D7DBF9A
 Amount of Each Receipt this Period **20.00**

B. Tracey E. Hodge
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Provider Network Rep
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : C4D297BC21EA4786BDFE
 Amount of Each Receipt this Period **20.00**

C. Tracey E. Hodge
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Provider Network Rep
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 22BAA0C839F74E23A1CE
 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 95 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Kim Hoff
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation DVP Technology Info Solutions
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 12 / 2015
Transaction ID : D93CEBC0AA7E4FC5B9B4
 Amount of Each Receipt this Period 35.00

B. Kim Hoff
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation DVP Technology Info Solutions
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 26 / 2015
Transaction ID : E885A11440403858C3D
 Amount of Each Receipt this Period 35.00

C. Melissa Phillips Holladay
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Provider Analysis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 12 / 2015
Transaction ID : DC4648A5DCA64798A4A9
 Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 96 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Melissa Phillips Holladay
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Provider Analysis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 5E7BAD41D14E4737B4EC
 Amount of Each Receipt this Period
 40.00

B. Denise Nicot Holmes
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Project Management I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : F2369FAB5B484F86A1C0
 Amount of Each Receipt this Period
 20.00

C. Denise Nicot Holmes
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Project Management I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : DEDEA2F831BB434DBBB0
 Amount of Each Receipt this Period
 20.00

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 97 OF 254
(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)
Health Care Service Corporation Employees' Political Action Committee

A. Sarah Allen Hoover
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Actuary
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 12 / 2015
Transaction ID : 95F4EA483DB047838F60
Amount of Each Receipt this Period
20.00

B. Sarah Allen Hoover
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Actuary
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 26 / 2015
Transaction ID : CEC2567A6D3D44CFA787
Amount of Each Receipt this Period
20.00

C. Sharyn K. Hoptay
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Dir EHCM Program Strat & Imp
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 12 / 2015
Transaction ID : E1C7A20E6E4644009DFE
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 98 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Sharyn K. Hoptay
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir EHCM Program Strat & Imp
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : BC55B71699B9464085AD
 Amount of Each Receipt this Period 200.00

B. Richard N. Horn
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Sales Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 74D0389FFA0F4F829230
 Amount of Each Receipt this Period 40.00

C. Richard N. Horn
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Sales Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 26 / 2015
Transaction ID : A372430E6F9C4CF7858E
 Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
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 99 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. John Hosea
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Exec Dir Emp Well & Benef Cons
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 485.00

Date of Receipt 06 / 12 / 2015
Transaction ID : C298FCF9BA1C4E988455
Amount of Each Receipt this Period 45.00

B. John Hosea
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Exec Dir Emp Well & Benef Cons
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 485.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 48DD04E812A541129C29
Amount of Each Receipt this Period 45.00

C. Laura R. Hottel
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Dir Network Management
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 9201E51FD07B46E1B4D0
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 100 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Laura R. Hottel
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Network Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 5DFAB8F3F2D84784A1EB
 Amount of Each Receipt this Period
 20.00

B. Hilarie Deann Houghton
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Communications Consultant III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 1FCF68B8F1194C0590FE
 Amount of Each Receipt this Period
 20.00

C. Hilarie Deann Houghton
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Communications Consultant III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 5D8D3099EB2346649ED1
 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 101 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Liangjiao Huang
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Actuary III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : ACBE6EB19CCE4DC3A601
 Amount of Each Receipt this Period
 35.00

B. Liangjiao Huang
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Actuary III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : E78649BDCD92463D9F0A
 Amount of Each Receipt this Period
 35.00

C. Paula A. Huck
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Community Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 58C3D534F9B84DEAB6A1
 Amount of Each Receipt this Period
 20.00

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 102 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Paula A. Huck
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir Community Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
06 / 26 / 2015
Transaction ID : D5792E2753934A9BB54E

Amount of Each Receipt this Period
20.00

B. Laura E. Hutchison
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Retail Strategy&Infrastrure

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt
06 / 12 / 2015
Transaction ID : B491ACAF9BC54F90B442

Amount of Each Receipt this Period
45.00

C. Laura E. Hutchison
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Retail Strategy&Infrastrure

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt
06 / 26 / 2015
Transaction ID : A55453B674D94A09BFD7

Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00

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 103 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Stephanie J. Hutchison
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Market Research
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 1C47E12C0F5F416081DC
 Amount of Each Receipt this Period
 20.00

B. Stephanie J. Hutchison
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Market Research
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : 81851D6561D2408D9445
 Amount of Each Receipt this Period
 20.00

C. Robert Imes
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Health Policy Private Mkts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 834B83A20DF047CC89B4
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
TOTAL This Period (last page this line number only)..... ▶

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

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FOR LINE NUMBER: PAGE 104 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)
A. Robert Imes

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Health Policy Private Mkts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 3B7FAE990B404F19BEAF

Amount of Each Receipt this Period **100.00**

Full Name (Last, First, Middle Initial)
B. Donald Kevin Irby

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Actuary & DVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 8F3BBCFA258642EFBC51

Amount of Each Receipt this Period **45.00**

Full Name (Last, First, Middle Initial)
C. Donald Kevin Irby

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Actuary & DVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : DF5EA292A28347E6B430

Amount of Each Receipt this Period **45.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **190.00**

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

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

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FOR LINE NUMBER: PAGE 105 OF 254
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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Margaret T. Isom
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Sales Executive Small Group
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : FAE339AFFE8B4D32A58C
 Amount of Each Receipt this Period
 20.00

B. Margaret T. Isom
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Sales Executive Small Group
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : F4A87CFDB1094E66B3EB
 Amount of Each Receipt this Period
 20.00

C. Lori N. Ivanoff
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Provider Contracting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 4248B6C643934511B629
 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 106 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Lori N. Ivanoff
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Provider Contracting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 856E0653F76641D0A02A
 Amount of Each Receipt this Period 20.00

B. Mary S. Izlar
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sup Enter Tstg & Bus Analy Svc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : A171080ADC2A44139166
 Amount of Each Receipt this Period 20.00

c. Mary S. Izlar
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sup Enter Tstg & Bus Analy Svc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 328327A6A2D1420BB677
 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: (check only one)	PAGE 107 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Kelly A. Jacks
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Dir Compliance Investigat

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 45D9DC64AA8C4CB793CE

Amount of Each Receipt this Period **30.00**

B. Kelly A. Jacks
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Dir Compliance Investigat

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 7ADB9B191C2240B79825

Amount of Each Receipt this Period **30.00**

C. Jeffrey L. Jacobi
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir Mid Market Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 2D961153E07149E0A980

Amount of Each Receipt this Period **30.00**

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: PAGE 108 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)
A. Jeffrey L. Jacobi

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir Mid Market Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 6A01613D3B414A13AD3C

Amount of Each Receipt this Period **30.00**

Full Name (Last, First, Middle Initial)
B. Robert J. Janicek

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP ITG Services MT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **455.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 19F594E8D9BC41328FEE

Amount of Each Receipt this Period **35.00**

Full Name (Last, First, Middle Initial)
C. Robert J. Janicek

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP ITG Services MT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **455.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : B87517096E3641859A48

Amount of Each Receipt this Period **35.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **100.00**

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 109 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Robert Janowitz
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Medical Director II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 0D7C22C7B58A4376AA5C

Amount of Each Receipt this Period **60.00**

B. Robert Janowitz
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Medical Director II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 0F647F3F7B30441CA17E

Amount of Each Receipt this Period **60.00**

C. Susan D. Jeffers
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1495.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 7EE0BA8E59C4484A91C4

Amount of Each Receipt this Period **115.00**

SUBTOTAL of Receipts This Page (optional)..... **235.00**

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 110 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial) A. Susan D. Jeffers			Date of Receipt MM / DD / YYYY 06 / 26 / 2015 Transaction ID : 20DA3D0B55F641E2A3AF
Mailing Address 300 E. Randolph St			Amount of Each Receipt this Period 115.00
City Chicago	State IL	Zip Code 60601	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1495.00	
Name of Employer Health Care Service Corporation		Occupation VP Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. William C. Jeffery			Date of Receipt MM / DD / YYYY 06 / 12 / 2015 Transaction ID : 7983DC0BD10645EBB342
Mailing Address 300 E. Randolph St			Amount of Each Receipt this Period 20.00
City Chicago	State IL	Zip Code 60601	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 260.00	
Name of Employer Health Care Service Corporation		Occupation Dir Special Programs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. William C. Jeffery			Date of Receipt MM / DD / YYYY 06 / 26 / 2015 Transaction ID : CCC740632FA5437DB828
Mailing Address 300 E. Randolph St			Amount of Each Receipt this Period 20.00
City Chicago	State IL	Zip Code 60601	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 260.00	
Name of Employer Health Care Service Corporation		Occupation Dir Special Programs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	155.00
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 111 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Rodrick P. Johns
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Maj/Nat Strategic Acct Exec I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 0AF5458C5AC143A5999F
 Amount of Each Receipt this Period
 20.00

B. Rodrick P. Johns
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Maj/Nat Strategic Acct Exec I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 73578CD1464A4FBC9ADA
 Amount of Each Receipt this Period
 20.00

C. Cynthia A. Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Ent Prod & Clin Opr Int
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 950B1A9BF9A845B1A40A
 Amount of Each Receipt this Period
 70.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 112 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Cynthia A. Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Ent Prod & Clin Opr Int
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 21DE864DEF0449BCB0CD
 Amount of Each Receipt this Period 70.00

B. Donna Lynn Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr IT Audit & Support Service
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 21D9D1A923724CEBA71D
 Amount of Each Receipt this Period 20.00

C. Donna Lynn Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr IT Audit & Support Service
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 48E0CCB903194FCDA086
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 113 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Travis B. Johnson
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Dir Account Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 7D48F04618EE4C06B92E

Amount of Each Receipt this Period **30.00**

B. Travis B. Johnson
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Dir Account Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 8A685070E191470DA1A8

Amount of Each Receipt this Period **30.00**

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

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation SVP Fin & Strat Suppt & Optim

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 01A2B2E0F32748FA81EC

Amount of Each Receipt this Period **100.00**

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:	PAGE 114 OF 254
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. James L. Kadela
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation SVP Fin & Strat Suppt & Optim
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 7354A1EDF8E64595AEF7
Amount of Each Receipt this Period 100.00

B. Mary Anne Kania
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Dir Audit Services
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : B20A36D75EA2433DBFF1
Amount of Each Receipt this Period 20.00

C. Mary Anne Kania
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Dir Audit Services
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : F0460EB69F21448A8F81
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
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 115 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Rika P. Kari
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Dir Analytics Consulting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 7A20BF047C164E4F9B2E

Amount of Each Receipt this Period 20.00

B. Rika P. Kari
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Dir Analytics Consulting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 30E6F85ED2A64909B415

Amount of Each Receipt this Period 20.00

C. Kimm A. Kartman
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Major/National Accounts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 973983D2A04E49CEA153

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: (check only one)	PAGE 116 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Kimm A. Kartman
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Major/National Accounts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : FC03EFA5505B46E08631
 Amount of Each Receipt this Period
 20.00

B. Denise V. Kawas
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Small Group&Ind Sal/Acct
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : F2219DAE27EF423F9014
 Amount of Each Receipt this Period
 30.00

C. Denise V. Kawas
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Small Group&Ind Sal/Acct
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 820B16162519455D8731
 Amount of Each Receipt this Period
 30.00

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: (check only one)	PAGE 117 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Jason M. Kaye
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Corporate Real Estate & Dev

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 41A7E58F61504074BB40

Amount of Each Receipt this Period **45.00**

B. Jason M. Kaye
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Corporate Real Estate & Dev

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 2F62F0D361DE4A2EB08F

Amount of Each Receipt this Period **45.00**

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

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Network Management OK DVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : FEF7E0FA33B14DA3924E

Amount of Each Receipt this Period **30.00**

SUBTOTAL of Receipts This Page (optional)..... **120.00**

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 118 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Richard Kelly
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Network Management OK DVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 26 / 2015
Transaction ID : E61C7EE790834108AB94
 Amount of Each Receipt this Period 30.00

B. Jerry M. Kerbo
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Major/Natl Account Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 2126C7950ABF4B05A356
 Amount of Each Receipt this Period 38.00

C. Jerry M. Kerbo
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Major/Natl Account Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 494.00

Date of Receipt 06 / 26 / 2015
Transaction ID : F4BC16889BB946508AA9
 Amount of Each Receipt this Period 38.00

SUBTOTAL of Receipts This Page (optional)..... ► 106.00
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 119 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Kenneth G. Kerr
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Process Consultant III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 7979399F53FC46BDB7DF
 Amount of Each Receipt this Period
 20.00

B. Kenneth G. Kerr
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Process Consultant III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : DFEB14D3497F49E58F50
 Amount of Each Receipt this Period
 20.00

C. Laura A. Kibby
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Med Mgmt Accreditation Coord
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 888A9A23737148ED9780
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 120 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Laura A. Kibby
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Med Mgmt Accreditation Coord

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : C19815DB9F4F48B89AC9

Amount of Each Receipt this Period **300.00**

B. Janice J. Knight
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation SVP and Chief Actuary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1560.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : B795FDE0D2FF459F9B96

Amount of Each Receipt this Period **120.00**

C. Janice J. Knight
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation SVP and Chief Actuary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1560.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : EA5431A3E218495696A6

Amount of Each Receipt this Period **120.00**

SUBTOTAL of Receipts This Page (optional)..... **270.00**

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 121 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Michelle Komar
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
06 / 12 / 2015
Transaction ID : 849F6BBF62024003B3DD

Amount of Each Receipt this Period
20.00

B. Michelle Komar
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
06 / 26 / 2015
Transaction ID : 982E0390E4474EC0AFD6

Amount of Each Receipt this Period
20.00

C. John E. Kosky
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP & General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 910.00

Date of Receipt
06 / 12 / 2015
Transaction ID : 44FCAADD363C45EDB8E6

Amount of Each Receipt this Period
70.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00

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 122 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. John E. Kosky
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP & General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 26 / 2015
Transaction ID : CBD55B7DBE5B4CCD8CA
 Amount of Each Receipt this Period 70.00

B. Kurtis J. Kossen
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Retail Markets
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 097579D491A545A4AFDB
 Amount of Each Receipt this Period 60.00

C. Kurtis J. Kossen
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Retail Markets
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 57B587DF538246779925
 Amount of Each Receipt this Period 60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 190.00
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 123 OF 254
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Charlene M. Krueger
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Network I
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : BB1F55919B5D4A9C9DF8
 Amount of Each Receipt this Period **20.00**

B. Charlene M. Krueger
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Network I
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 5A2A1F5BEAB94C55A208
 Amount of Each Receipt this Period **20.00**

c. Linda C. Kunkel Glogovsky
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Enterprise Sourcing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 543B741E371143E39C07
 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 124 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Linda C. Kunkel Glogovsky
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Enterprise Sourcing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : CF0892A4C83F4D19BDA6
 Amount of Each Receipt this Period 20.00

B. Mary A. Leahy
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Project Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : A7218BBD FCF448D6814C
 Amount of Each Receipt this Period 20.00

C. Mary A. Leahy
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Project Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : ED00DC6C89674BE39A00
 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: (check only one)	PAGE 125 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Montie M. Ledford
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Business Portfolio
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 52CBD77E32DC4B388A34
 Amount of Each Receipt this Period
 20.00

B. Montie M. Ledford
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Business Portfolio
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 593241AA35104DEFA49C
 Amount of Each Receipt this Period
 20.00

C. Sarah B. Lee
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr IT Business Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : A8835DAA5C40497B90C8
 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 126 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Sarah B. Lee
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr IT Business Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : E6AE8399FBE74982A586
 Amount of Each Receipt this Period
 20.00

B. Jeanne R. Lehman
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Clinical Programs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 4768150927C64CD3A3A1
 Amount of Each Receipt this Period
 20.00

C. Jeanne R. Lehman
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Clinical Programs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 11B939DDE9CA4F499BEE
 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: (check only one)	PAGE 127 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Johnna R. Lenamon
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Provider Contracting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 44F617E47B5A4999B583
 Amount of Each Receipt this Period
 70.00

B. Johnna R. Lenamon
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Provider Contracting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : D0DAE61EFFB844E3A3F5
 Amount of Each Receipt this Period
 70.00

C. Gnaneshwar Lendale
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Application Development Spec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 17F1A196B19748A4B70F
 Amount of Each Receipt this Period
 20.00

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 128 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Gnaneshwar Lendale
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Application Development Spec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : 2A6F2A06379B427A90B5
 Amount of Each Receipt this Period
 20.00

B. Linden Todd Lindsey
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Application
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 90382703305C4F2EAD39
 Amount of Each Receipt this Period
 20.00

C. Linden Todd Lindsey
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Application
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : F17026E2CD63456EBC31
 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: (check only one)	PAGE 129 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Judy Loden Gragg
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Consumer Mkts Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : FC0038D3CB1B462FB031

Amount of Each Receipt this Period 20.00

B. Judy Loden Gragg
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Consumer Mkts Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : AC8EB3FEFB2A48488AEC

Amount of Each Receipt this Period 20.00

C. William Paul Lombardi
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation DVP MT Govt Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2470.00

Date of Receipt 06 / 12 / 2015
Transaction ID : DE08A74AC58741AAA1E3

Amount of Each Receipt this Period 190.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00

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 130 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. William Paul Lombardi
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation DVP MT Govt Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2470.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 11A2FCB7D5CE44208654
 Amount of Each Receipt this Period **190.00**

B. Frances Ann Losacco
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Application
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **325.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 8B63A986DF6143448524
 Amount of Each Receipt this Period **25.00**

C. Frances Ann Losacco
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Application
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **325.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 985C6F91684F44B59108
 Amount of Each Receipt this Period **25.00**

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 131 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Health Care Service Corporation Employees' Political Action Committee

A. Richard C. Luttrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Marketing Research
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 0E692CE4494C4E4B8CC1
 Amount of Each Receipt this Period
 30.00

B. Richard C. Luttrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Marketing Research
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : D5A9235BCE3C4D4987B1
 Amount of Each Receipt this Period
 30.00

C. Bruce G Macleish
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Actuary III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 772DF1B4C3C84E90A7D1
 Amount of Each Receipt this Period
 25.00

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: (check only one)	PAGE 132 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Bruce G Macleish
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Actuary III

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 9818E6916D9D46F48EA7

Amount of Each Receipt this Period **25.00**

B. James P. Mahoney
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir Small Grp/Ind Sales&Acct M

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 6A48873FE9BB43E1BEAA

Amount of Each Receipt this Period **20.00**

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

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir Small Grp/Ind Sales&Acct M

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : E01D428A43A44D8BA715

Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... **65.00**

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 133 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Joseph F. Malinowski
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Student Health Acct Mgt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt
06 / 12 / 2015
Transaction ID : 74AD586255CC4DCDA910

Amount of Each Receipt this Period
30.00

B. Joseph F. Malinowski
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Student Health Acct Mgt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt
06 / 26 / 2015
Transaction ID : F20D19FCFE0542CBA2DC

Amount of Each Receipt this Period
30.00

C. Steve J. Mallon
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sub Svcs Div SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt
06 / 12 / 2015
Transaction ID : 51F7E14DB8214E6BBB18

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional)..... **120.00**

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 134 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Steve J. Mallon
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sub Svcs Div SVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : C1F24B7AF7AB484F805F

Amount of Each Receipt this Period **60.00**

B. Theria Malone
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Condition Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 241966DF259449C7A1D8

Amount of Each Receipt this Period **30.00**

C. Theria Malone
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Condition Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 2AF7BC75C42643E0A732

Amount of Each Receipt this Period **30.00**

SUBTOTAL of Receipts This Page (optional)..... **120.00**

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 135 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Vera L. Malone
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Compliance Ops&HISC Complia
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 8E742D0F9ED148B9BC6A
 Amount of Each Receipt this Period
 30.00

B. Vera L. Malone
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Compliance Ops&HISC Complia
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : 04387449E1C348BFBEA3
 Amount of Each Receipt this Period
 30.00

C. Robert Henry Manning
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Application Development Spec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 5899E606F7454A5E8C0A
 Amount of Each Receipt this Period
 20.00

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 136 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)
A. Robert Henry Manning

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Application Development Spec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
06 / 26 / 2015

Transaction ID : B183504718464A718381

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Chris M. Marcelle

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Dir-SSD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
06 / 12 / 2015

Transaction ID : FACC39EB9C92415A92DD

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Chris M. Marcelle

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Dir-SSD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
06 / 26 / 2015

Transaction ID : 838533913B0045A1A8C6

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: (check only one)	PAGE 137 OF 254
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Gregory Marino
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Medical Director II
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **585.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 5C4D06F0274545F2A4A0
Amount of Each Receipt this Period **45.00**

B. Gregory Marino
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Medical Director II
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **585.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : C321081F8847419DB2FC
Amount of Each Receipt this Period **45.00**

C. Michael J. Marks
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Maj/Natl Accts IL DVP
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **585.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : A3330D35A3F041BE9764
Amount of Each Receipt this Period **45.00**

SUBTOTAL of Receipts This Page (optional)..... **135.00**
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 138 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Michael J. Marks
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Maj/Natl Accts IL DVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt
06 / 26 / 2015
Transaction ID : 9D75A2A46FEF4A97A5D6

Amount of Each Receipt this Period
45.00

B. Bert E. Marshall
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation President Texas Division

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2496.00**

Date of Receipt
06 / 12 / 2015
Transaction ID : 1AC18FF23A33484CBEEC

Amount of Each Receipt this Period
192.00

C. Bert E. Marshall
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation President Texas Division

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2496.00**

Date of Receipt
06 / 26 / 2015
Transaction ID : 875338BD8D114E50BD92

Amount of Each Receipt this Period
192.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **429.00**

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 139 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Alisa L. Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir EHCM BCC Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : C19852E3E929411DA770
 Amount of Each Receipt this Period
 30.00

B. Alisa L. Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir EHCM BCC Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 74AB0D88099E475F83D5
 Amount of Each Receipt this Period
 30.00

C. Jeff Lynn Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Asst General Counsel II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 3EB2866A240941CB892E
 Amount of Each Receipt this Period
 70.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00
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 140 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Jeff Lynn Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Asst General Counsel II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : D345CAEB0F984C43A2D8
 Amount of Each Receipt this Period
 70.00

B. Benjamin M. Martinez
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Small Group Account Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : D46793C03DA34524921B
 Amount of Each Receipt this Period
 20.00

C. Benjamin M. Martinez
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Small Group Account Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 7076E1ACFCBD4A23A47C
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 141 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Thomas Maryon
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP EHCM Grp & Retail Accts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 83590CC78803403DBAC4
 Amount of Each Receipt this Period
 60.00

B. Thomas Maryon
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP EHCM Grp & Retail Accts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 13BC133553384F659281
 Amount of Each Receipt this Period
 60.00

C. Patricia Fuller McCandless
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Exec Dir TX Govt Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 5BD216794DA245F7AFB3
 Amount of Each Receipt this Period
 70.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 190.00
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 142 OF 254
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Patricia Fuller McCandless
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Exec Dir TX Govt Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **910.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : A668EEAB26D14AFAB068
 Amount of Each Receipt this Period **70.00**

B. Shara B. McClure
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP-Network Management TX
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **910.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 852D96ACAD604507A03D
 Amount of Each Receipt this Period **70.00**

C. Shara B. McClure
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP-Network Management TX
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **910.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 6B9B626F84F74B2D8068
 Amount of Each Receipt this Period **70.00**

SUBTOTAL of Receipts This Page (optional).....	210.00
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 143 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Health Care Service Corporation Employees' Political Action Committee

A. Heather D. McCown
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Mkt Ops Plan & Projs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : DD494D7335204A2AB53D
 Amount of Each Receipt this Period
 20.00

B. Heather D. McCown
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Mkt Ops Plan & Projs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : ED15B1CF016846C89359
 Amount of Each Receipt this Period
 20.00

C. Danny Ken McCoy
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP & Chief Medical Officer-Tx
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 945.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 19374060FC16420FB782
 Amount of Each Receipt this Period
 115.00

SUBTOTAL of Receipts This Page (optional).....▶	155.00
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 144 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Danny Ken McCoy
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP & Chief Medical Officer-Tx
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 945.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 788A2597BA8A482096BE
 Amount of Each Receipt this Period 115.00

B. Conway Lawrence McDanald
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP & Chief Medical Officer BH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 06 / 12 / 2015
Transaction ID : C73E04CCFA06401484AD
 Amount of Each Receipt this Period 60.00

C. Conway Lawrence McDanald
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP & Chief Medical Officer BH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 17C17EAE33064A07B7AF
 Amount of Each Receipt this Period 60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
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 145 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Randall N. McDaniel
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Local Group Markets TX DVP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 16C59F177DAE40F2A874
Amount of Each Receipt this Period 70.00

B. Randall N. McDaniel
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Local Group Markets TX DVP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 26 / 2015
Transaction ID : EBC43E10F07E461CB93C
Amount of Each Receipt this Period 70.00

C. Guy P. McGinnis
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation VP Client Analytics
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 675.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 302E738165614612A3AA
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 190.00
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 146 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Guy P. McGinnis
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Client Analytics

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : CFE6C920F45A42C19067

Amount of Each Receipt this Period **75.00**

B. James D. McLean
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP SSD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 46BE0F44A81F49CA9C83

Amount of Each Receipt this Period **20.00**

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

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP SSD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 3714EE16BA5B4795BF41

Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... **115.00**

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 147 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Health Care Service Corporation Employees' Political Action Committee

A. Patricia M. Metcalf
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Asst Mgr Performance Audit Svc
 Receipt For: Primary General Other (specify)

Date of Receipt
 06 / 12 / 2015
Transaction ID : FD487D98FB3248A49187
 Amount of Each Receipt this Period
 20.00
 Aggregate Year-to-Date ▼
 260.00

B. Patricia M. Metcalf
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Asst Mgr Performance Audit Svc
 Receipt For: Primary General Other (specify)

Date of Receipt
 06 / 26 / 2015
Transaction ID : C8C533759E9B4848B077
 Amount of Each Receipt this Period
 20.00
 Aggregate Year-to-Date ▼
 260.00

C. Iuliana Mihu
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Pharmacist
 Receipt For: Primary General Other (specify)

Date of Receipt
 06 / 12 / 2015
Transaction ID : 39C53253B3E247FE93C4
 Amount of Each Receipt this Period
 20.00
 Aggregate Year-to-Date ▼
 260.00

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 148 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Iuliana Mihu
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Pharmacist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : B4AAB239B28F451785D4
 Amount of Each Receipt this Period
 20.00

B. Michelle A. Milcarek
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Enterprise Health Care Consult
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 335FF45BA59A45B28527
 Amount of Each Receipt this Period
 20.00

C. Michelle A. Milcarek
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Enterprise Health Care Consult
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 9DC566E7CD88413885DA
 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: (check only one)	PAGE 149 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Diane C. Miller
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Subscriber Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 74ED8448C5AD4BE3AE4B

Amount of Each Receipt this Period 20.00

B. Diane Miller
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sup Application-Mainframe

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 931F4122186446CB93EB

Amount of Each Receipt this Period 20.00

C. Diane Miller
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sup Application-Mainframe

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : E87857D2E21A45559DD4

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: (check only one)	PAGE 150 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Diane C. Miller
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Subscriber Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 81529B355548471CB4BE

Amount of Each Receipt this Period 20.00

B. Andrea K. Mitchell
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Metro Brokerage Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 36A7BA8B04F24BA88A32

Amount of Each Receipt this Period 20.00

C. Andrea K. Mitchell
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Metro Brokerage Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 8D0450445FCA477EB7E4

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: (check only one)	PAGE 151 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial) A. Kimberly K. Mitchell		Date of Receipt
Mailing Address 300 E. Randolph St		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 0EA9308A6BA6447E9F95
Name of Employer Health Care Service Corporation		Amount of Each Receipt this Period
Occupation Sr Mgr Major/Natl Account Mgmt		<input type="text" value="30.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="390.00"/>		

Full Name (Last, First, Middle Initial) B. Kimberly K. Mitchell		Date of Receipt
Mailing Address 300 E. Randolph St		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A0304DB644E442D2A660
Name of Employer Health Care Service Corporation		Amount of Each Receipt this Period
Occupation Sr Mgr Major/Natl Account Mgmt		<input type="text" value="30.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="390.00"/>		

Full Name (Last, First, Middle Initial) C. Matthew L. Mize		Date of Receipt
Mailing Address 300 E. Randolph St		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : B816CF871E854E519CE2
Name of Employer Health Care Service Corporation		Amount of Each Receipt this Period
Occupation VP Revenue Optimization		<input type="text" value="45.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="585.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="105.00"/>
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 152 OF 254
(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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)
A. Matthew L. Mize

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Revenue Optimization

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 0AF8CBB3CFE64485B7D3

Amount of Each Receipt this Period **45.00**

Full Name (Last, First, Middle Initial)
B. William C. Monroe

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Special Investigations Dept

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : A24DCCBB64DC4A178903

Amount of Each Receipt this Period **45.00**

Full Name (Last, First, Middle Initial)
C. William C. Monroe

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Special Investigations Dept

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 5F1F2797C3A141FBA6E9

Amount of Each Receipt this Period **45.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **135.00**

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 153 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Darold Marc Monson
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Process Improvement Mgr II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 3EAE15D619D647C5BA36
 Amount of Each Receipt this Period 20.00

B. Darold Marc Monson
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Process Improvement Mgr II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 57CD6080EEDD446FB158
 Amount of Each Receipt this Period 20.00

C. Delores F. Moore
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP SSD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1105.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 777C68929CAC48109EF0
 Amount of Each Receipt this Period 85.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 154 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Delores F. Moore
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP SSD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1105.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 0C18FBD7244C4BB48277

Amount of Each Receipt this Period **85.00**

B. Daniel Moraga
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Dir Govt Prog Clinical Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : A12545840D9145EDA004

Amount of Each Receipt this Period **20.00**

C. Daniel Moraga
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Dir Govt Prog Clinical Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : B9A38478D7A74FCEBEE0

Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... **125.00**

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 155 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Elizabeth A. Morren
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Maj/Nat Principal Account Exec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 296A9233F08B479C8D4D
 Amount of Each Receipt this Period
 35.00

B. Elizabeth A. Morren
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Maj/Nat Principal Account Exec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : 5D79C387C66849738FE7
 Amount of Each Receipt this Period
 35.00

C. Robert Morrow
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1495.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 803939FC47034295A961
 Amount of Each Receipt this Period
 115.00

SUBTOTAL of Receipts This Page (optional).....▶	185.00
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 156 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Robert Morrow
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1495.00

Date of Receipt 06 / 26 / 2015
Transaction ID : D5582B4400884A0ABF2C
Amount of Each Receipt this Period 115.00

B. Douglas Mullins
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : A245D5FD4EFE4E47BC49
Amount of Each Receipt this Period 20.00

C. Douglas Mullins
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 5E320F02015D46FF999B
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.00
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 157 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Health Care Service Corporation Employees' Political Action Committee

A. Christopher J. Muniz
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir-SSD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 189738A539DD4C4BB25B
 Amount of Each Receipt this Period 50.00

B. Christopher J. Muniz
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir-SSD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 31B44960033D45B8ABFB
 Amount of Each Receipt this Period 50.00

C. Dale Myers
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Professional Provider Ntwk
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : BCF157A1E4A143A486A9
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
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 158 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)
A. Dale Myers
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Professional Provider Ntwk
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 2A9BC84FF4D545DE9B27
 Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Brian S. Nelson
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Exec Dir Marketing Technology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 17E8797E068E4A3699EF
 Amount of Each Receipt this Period
 35.00

Full Name (Last, First, Middle Initial)
C. Brian S. Nelson
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Exec Dir Marketing Technology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 1AEE3F2969104B36B455
 Amount of Each Receipt this Period
 35.00

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: PAGE 159 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Diana L. Nevins
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation National Accts Sales 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 Y
 06 / 12 / 2015
Transaction ID : DF15BBCF823847E0978D
 Amount of Each Receipt this Period
 20.00

B. Diana L. Nevins
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation National Accts Sales 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 Y
 06 / 26 / 2015
Transaction ID : 0F7704E4636D4848864D
 Amount of Each Receipt this Period
 20.00

C. Karen M. Newman
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Subscriber Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : AE43D7E84ED5401A8EE3
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 160 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Karen M. Newman
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Subscriber Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 567F8888A90C45CA8A7C
 Amount of Each Receipt this Period **30.00**

B. Jeffrey Nicola
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Retail Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **585.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 881B5859E68E4B3FBDDD
 Amount of Each Receipt this Period **45.00**

C. Jeffrey Nicola
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Retail Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **585.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 657DE7A1A5064C489DED
 Amount of Each Receipt this Period **45.00**

SUBTOTAL of Receipts This Page (optional)..... **120.00**
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 161 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Richard Nilles
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 8FF644F5E74A4671BCD0

Amount of Each Receipt this Period **45.00**

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

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 38E556BEEA404DDE8AB9

Amount of Each Receipt this Period **45.00**

C. Diane F. O'Brien
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Project Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : AC96CD2092694B17952C

Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... **110.00**

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 162 OF 254
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Diane F. O'Brien
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Project Management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : ED9802F3AE254EA9810F
 Amount of Each Receipt this Period **200.00**

B. Jacquelyn S. O'Brien
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Electronic Media Strategy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 8E210458CC51454F9302
 Amount of Each Receipt this Period **30.00**

C. Jacquelyn S. O'Brien
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Electronic Media Strategy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : C7D0CEBECB8E43E18ED2
 Amount of Each Receipt this Period **30.00**

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: (check only one)	PAGE 163 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Elaine A. Olzawski
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Health Care Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : ED6D76F0B4C94D11B77B
 Amount of Each Receipt this Period
 40.00

B. Elaine A. Olzawski
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Health Care Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 4C1648DA36F44A7A8B44
 Amount of Each Receipt this Period
 40.00

C. Suzie A. Omstead
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Clinical Account Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 4F62D48F24DC4DE88467
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
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 164 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Suzie A. Omstead
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Clinical Account Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 7E63180BEA30414684C9
 Amount of Each Receipt this Period **200.00**

B. Stephen Louis Ondra
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation SVP & CMO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2496.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : B93C5C8C0797400582DC
 Amount of Each Receipt this Period **192.00**

C. Stephen Louis Ondra
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation SVP & CMO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2496.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 87E426F6FEDF4E75BBE6
 Amount of Each Receipt this Period **192.00**

SUBTOTAL of Receipts This Page (optional).....	404.00
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 165 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Tina R. Oswalt
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir-SSD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 8A742AA5407149C59F45

Amount of Each Receipt this Period 20.00

B. Tina R. Oswalt
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir-SSD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 98241DCD953C4A8EB74D

Amount of Each Receipt this Period 20.00

C. Mark William Owen
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation President Government Programs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2496.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 9CC1D17E993A49F0BC63

Amount of Each Receipt this Period 192.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 232.00

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 166 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Mark William Owen
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation President Government Programs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2496.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 4AFEC97CF2A9459FAE4C
 Amount of Each Receipt this Period **192.00**

B. Paul T Pankewicz
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Bus Applications Solut
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **455.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 68BAFCFC009C467B9807
 Amount of Each Receipt this Period **35.00**

C. Paul T Pankewicz
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Bus Applications Solut
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **455.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 5935B0CA61E440FB95AF
 Amount of Each Receipt this Period **35.00**

SUBTOTAL of Receipts This Page (optional)..... **262.00**
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 167 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial) A. Randolph Wayne Pate		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 12 / 2015 Transaction ID : 6FEEA9C921B94F8883CD
Mailing Address 300 E. Randolph St		Amount of Each Receipt this Period 85.00
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C	Name of Employer Health Care Service Corporation	Occupation VP Public Policy
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1105.00	

Full Name (Last, First, Middle Initial) B. Randolph Wayne Pate		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 26 / 2015 Transaction ID : 518C35CC031B476CA099
Mailing Address 300 E. Randolph St		Amount of Each Receipt this Period 85.00
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C	Name of Employer Health Care Service Corporation	Occupation VP Public Policy
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1105.00	

Full Name (Last, First, Middle Initial) C. Laura H. Peck		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 12 / 2015 Transaction ID : 3C2417AABA8D4A62BCFB
Mailing Address 300 E. Randolph St		Amount of Each Receipt this Period 40.00
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C	Name of Employer Health Care Service Corporation	Occupation Legislative Rep & PAC Manager
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).....▶	210.00
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 168 OF 254
(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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)
A. Laura H. Peck

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Legislative Rep & PAC Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt
06 / 26 / 2015

Transaction ID : 09CE189E91E14F34B5D2

Amount of Each Receipt this Period
40.00

Full Name (Last, First, Middle Initial)
B. Janet M. Pennington

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation National Group & Exchange Cons

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
06 / 12 / 2015

Transaction ID : 8B7AC9C910884256BBC9

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Janet M. Pennington

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation National Group & Exchange Cons

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
06 / 26 / 2015

Transaction ID : 43347B3D06AA4AE4919B

Amount of Each Receipt this Period
20.00

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: (check only one)	PAGE 169 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Richard A. Petermeyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Mid Mkt Sales/Acct Mgt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : F6CF043557D445D8A5CE
 Amount of Each Receipt this Period
 30.00

B. Richard A. Petermeyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Mid Mkt Sales/Acct Mgt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 0E85F052A41042B4A900
 Amount of Each Receipt this Period
 30.00

C. John Thomas Petherick
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Govt Rel Health Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : FD1E663B7C9A404BAFF3
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 170 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. John Thomas Petherick
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Govt Rel Health Policy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 0D99993F436B4761813C

Amount of Each Receipt this Period **50.00**

B. Jerri Picha
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Mgr Facilities

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : D91279C31BCF4FF4A49D

Amount of Each Receipt this Period **20.00**

C. Jerri Picha
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Mgr Facilities

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 34AB2ED2FC5B472E8234

Amount of Each Receipt this Period **20.00**

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: PAGE 171 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Monica Lisa Pinon
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Associate General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 5E14132397AD4124AD76
 Amount of Each Receipt this Period
 20.00

B. Monica Lisa Pinon
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Associate General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : 789A4FBD890842F993F3
 Amount of Each Receipt this Period
 20.00

C. Dana Allison Popish
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir IL Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 507.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : A4B3DED4D98D4975AA9E
 Amount of Each Receipt this Period
 39.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 79.00
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 172 OF 254
	<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	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Dana Allison Popish
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir IL Government Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **507.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 185569BABDCD4EDA81BE
 Amount of Each Receipt this Period **39.00**

B. Angela L. Powell
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Maj/Nat Strategic Acct Exec II
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **335.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : C6ADB8ED04B944BE9917
 Amount of Each Receipt this Period **30.00**

C. Angela L. Powell
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Maj/Nat Strategic Acct Exec II
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **335.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 0A5FD00955AA444B9B25
 Amount of Each Receipt this Period **30.00**

SUBTOTAL of Receipts This Page (optional)..... **99.00**
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 173 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Tonya J. Powell
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Subscriber Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 2FBD28A499A444F8A792
 Amount of Each Receipt this Period
 20.00

B. Tonya J. Powell
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Subscriber Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : FE6481F390104F60BA2E
 Amount of Each Receipt this Period
 20.00

C. Catherine M. Pozega
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Major/Natl Sales Exec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : E3A4D053EA5F40A6AC53
 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 174 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Catherine M. Pozega
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Major/Natl Sales Exec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 627CF5A01B184BB7B87F
 Amount of Each Receipt this Period 20.00

B. Walter A. Price
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Systems Software Prog Consult
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : CDA9B4A11CDE45919651
 Amount of Each Receipt this Period 20.00

C. Walter A. Price
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Systems Software Prog Consult
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 14E97301CDBC4D27BCA3
 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: (check only one)	PAGE 175 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Chris Privoznik
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Exec Dir Office of the CIO
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **630.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 2742562C42E24D21AD74
Amount of Each Receipt this Period **35.00**

B. Chris Privoznik
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Exec Dir Office of the CIO
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **630.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : CODEF26E883048EDAE19
Amount of Each Receipt this Period **35.00**

C. Nancy C. Pruitt
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation DSVP General Counsel Southwest
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1495.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : B479A426F36541F79FEE
Amount of Each Receipt this Period **115.00**

SUBTOTAL of Receipts This Page (optional)..... **185.00**
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 176 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Nancy C. Pruitt
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation DSVP General Counsel Southwest
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1495.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 8FA8B736DA49442D8356
 Amount of Each Receipt this Period **115.00**

B. James S. Pusateri
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Key Accounts
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **585.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 64DBFA40015743B0A1CD
 Amount of Each Receipt this Period **45.00**

C. James S. Pusateri
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Key Accounts
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **585.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 77C6B9E712224F42ADC1
 Amount of Each Receipt this Period **45.00**

SUBTOTAL of Receipts This Page (optional)..... **205.00**
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 177 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Julianne Margaret Qualiato
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Cash Management & Control
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : EEFEEEE88772149DDB5D4
 Amount of Each Receipt this Period 20.00

B. Julianne Margaret Qualiato
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Cash Management & Control
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 1B10A51FC8604E9199A9
 Amount of Each Receipt this Period 20.00

C. Gnana R. Rao Kathi
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Investment Analysis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 12 / 2015
Transaction ID : A0332C5512694E909439
 Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 178 OF 254
(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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial) A. Gnana R. Rao Kathi		Date of Receipt MM / DD / YYYY 06 / 26 / 2015 Transaction ID : F851E67005F24481853A
Mailing Address 300 E. Randolph St		Amount of Each Receipt this Period 300.00
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C		
Name of Employer Health Care Service Corporation	Occupation Sr Mgr Investment Analysis	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name (Last, First, Middle Initial) B. Bernadette A. Rasmussen		Date of Receipt MM / DD / YYYY 06 / 12 / 2015 Transaction ID : EDCC2AA4A3A443BE9021
Mailing Address 300 E. Randolph St		Amount of Each Receipt this Period 45.00
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C		
Name of Employer Health Care Service Corporation	Occupation DSVP Info Mgt & Chief Tech Off	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

Full Name (Last, First, Middle Initial) C. Bernadette A. Rasmussen		Date of Receipt MM / DD / YYYY 06 / 26 / 2015 Transaction ID : 28FA1CA766B04C43ADB8
Mailing Address 300 E. Randolph St		Amount of Each Receipt this Period 45.00
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C		
Name of Employer Health Care Service Corporation	Occupation DSVP Info Mgt & Chief Tech Off	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 179 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Nazneen Razi
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation SVP-Chief HR Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2496.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : C94B5DE149E44B9B8FFD
 Amount of Each Receipt this Period
 192.00

B. Nazneen Razi
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation SVP-Chief HR Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2496.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 6FBC836A48A14A649742
 Amount of Each Receipt this Period
 192.00

C. David Redman
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation 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 Y
 06 / 12 / 2015
Transaction ID : 856C2AD4FD9C453A9C35
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 404.00
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 180 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. David Redman
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : BFB56A84936B4F8AB480
 Amount of Each Receipt this Period **20.00**

B. Patricia L. Rees
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Small Grp Acct/Call Ctr
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 789608FB843D4274A6BA
 Amount of Each Receipt this Period **20.00**

C. Patricia L. Rees
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Small Grp Acct/Call Ctr
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : C00612CFE89C44489C41
 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: (check only one)	PAGE 181 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Colleen Foley Reitan
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation EVP & Chief Operating Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2496.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 0C7C2259F64C40FCB10D
 Amount of Each Receipt this Period **192.00**

B. Colleen Foley Reitan
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation EVP & Chief Operating Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2496.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : CE66B54E749E49D29764
 Amount of Each Receipt this Period **192.00**

C. Edward T. Renteria
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr SW Reg Privacy&Legislat
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 0275357EBFAE4EABBA64
 Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional).....	404.00
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 182 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)
A. Edward T. Renteria

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr SW Reg Privacy&Legislat

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 2FE8DFEA51654468B756

Amount of Each Receipt this Period **200.00**

Full Name (Last, First, Middle Initial)
B. Julie P. Rethmeyer

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 431044F1AB6E40D4997D

Amount of Each Receipt this Period **30.00**

Full Name (Last, First, Middle Initial)
C. Julie P. Rethmeyer

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : C70769045063426E8149

Amount of Each Receipt this Period **30.00**

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 183 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Beatriz G. Reyes
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Enterprise Bus Process
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 70795408CDE24D1491C1
 Amount of Each Receipt this Period 35.00

B. Beatriz G. Reyes
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Enterprise Bus Process
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 26 / 2015
Transaction ID : E73C2CBCD3174E63B500
 Amount of Each Receipt this Period 35.00

C. Michelle M. Riddell
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Strategy Comm & Commnty Inv
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 263CB22AB19D45E3B36E
 Amount of Each Receipt this Period 70.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
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 184 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Michelle M. Riddell
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Strategy Comm & Commnty Inv
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 26 / 2015
Transaction ID : C09A64370BB5494197D5
 Amount of Each Receipt this Period 70.00

B. Carol J. Riley
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir National Accts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 7324F8B8B2D143358EE1
 Amount of Each Receipt this Period 70.00

C. Carol J. Riley
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir National Accts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 26 / 2015
Transaction ID : D6697A90B9EB48DDB145
 Amount of Each Receipt this Period 70.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00
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 185 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Cathy Roach
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Subscriber Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
06 / 12 / 2015

Transaction ID : 0EA6AB12754D489D96D2

Amount of Each Receipt this Period
20.00

B. Cathy Roach
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Subscriber Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
06 / 26 / 2015

Transaction ID : 8C30AFE19455403EB89E

Amount of Each Receipt this Period
20.00

C. Jimmy D Rodgers
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation SVP & Chief Marketing Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2496.00**

Date of Receipt
06 / 12 / 2015

Transaction ID : 8DB0E9A015D04ECB90B9

Amount of Each Receipt this Period
192.00

SUBTOTAL of Receipts This Page (optional)..... **232.00**

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 186 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Jimmy D Rodgers
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation SVP & Chief Marketing Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2496.00**

Date of Receipt
 06 / 26 / 2015
Transaction ID : A5FD27CAA31543B0A3C6
 Amount of Each Receipt this Period
192.00

B. Sue Anne Rohan
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Health Policy Govt Programs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1495.00**

Date of Receipt
 06 / 12 / 2015
Transaction ID : AD6970F6339A4476BA48
 Amount of Each Receipt this Period
115.00

C. Sue Anne Rohan
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Health Policy Govt Programs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1495.00**

Date of Receipt
 06 / 26 / 2015
Transaction ID : 76779574DEC349BAB273
 Amount of Each Receipt this Period
115.00

SUBTOTAL of Receipts This Page (optional).....	422.00
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 187 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Kelly J. Rooney
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Dir Provider Relations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 12 / 2015
Transaction ID : **BA52DEBAA88D4BFA9797**
Amount of Each Receipt this Period 30.00

B. Kelly J. Rooney
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Dir Provider Relations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 26 / 2015
Transaction ID : **6F3419C74CE64D4A8101**
Amount of Each Receipt this Period 30.00

C. Paula R. Root
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Medical Director II
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : **AFDEB0B99F1F44E9B852**
Amount of Each Receipt this Period 20.00

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: (check only one)	PAGE 188 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Paula R. Root
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Medical Director II
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 3EF5512501B44484A54E
Amount of Each Receipt this Period 20.00

B. Lois J. Rudy
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Unit Mgr Marketing Support
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 4EE7DF9B6AA840559C44
Amount of Each Receipt this Period 20.00

C. Lois J. Rudy
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Unit Mgr Marketing Support
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 88FD81D2732E4A3BB66B
Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 189 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Janet K. Rutherford
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Ld Outcomes Reporting Analyst
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 169A19CC1E7B42DC8BB6
 Amount of Each Receipt this Period **20.00**

B. Janet K. Rutherford
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Ld Outcomes Reporting Analyst
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : F9DAA79115A24F4AB7E0
 Amount of Each Receipt this Period **20.00**

c. Charles R. Rygiel
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Bus Applications Solut
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **910.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 2CBF0E57CAA544A08E1E
 Amount of Each Receipt this Period **70.00**

SUBTOTAL of Receipts This Page (optional)..... **110.00**
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 190 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)
A. Charles R. Rygiel

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Dir Bus Applications Solut

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **910.00**

Date of Receipt
06 / 26 / 2015
Transaction ID : 14F86975022E4499946A

Amount of Each Receipt this Period
70.00

Full Name (Last, First, Middle Initial)
B. Jason G. Rzeszutko

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Bus Applications Solutions DVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt
06 / 12 / 2015
Transaction ID : DEB142AF275941438E91

Amount of Each Receipt this Period
45.00

Full Name (Last, First, Middle Initial)
C. Jason G. Rzeszutko

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Bus Applications Solutions DVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt
06 / 26 / 2015
Transaction ID : 6D4E45F30FE240E48F1A

Amount of Each Receipt this Period
45.00

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: PAGE 191 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Melissa A. Sanden
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Mid Market Account Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **390.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 12 / 2015
Transaction ID : 97C0FB89E4B441B2B260
 Amount of Each Receipt this Period
30.00

B. Melissa A. Sanden
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Mid Market Account Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **390.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2015
Transaction ID : 55D2F6268B18469195A6
 Amount of Each Receipt this Period
30.00

C. David Blair Sandor
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Public Affairs&Corp Commun
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **585.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 12 / 2015
Transaction ID : 1A1D8406908A4779AF38
 Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **105.00**
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 192 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. David Blair Sandor
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Public Affairs&Corp Commun
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 583AE1E5C8944037B21C
 Amount of Each Receipt this Period 45.00

B. Michael S. Saraco
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Systems Software Prog Spec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : B6122F9048C245CE8B89
 Amount of Each Receipt this Period 20.00

C. Michael S. Saraco
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Systems Software Prog Spec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 3AB8FAF0551A4D70AB3A
 Amount of Each Receipt this Period 20.00

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 193 OF 254
	(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"/> 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)
Health Care Service Corporation Employees' Political Action Committee

A. Harold Scott Sarran
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation DSVP HCM Gov't Programs & CMO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1495.00

Date of Receipt 06 / 12 / 2015
Transaction ID : E5BD0F131B114384A91C
 Amount of Each Receipt this Period 115.00

B. Harold Scott Sarran
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation DSVP HCM Gov't Programs & CMO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1495.00

Date of Receipt 06 / 26 / 2015
Transaction ID : AB9491D7F0784B59BCDE
 Amount of Each Receipt this Period 115.00

C. Patricia A. Savitsky
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation SVP & Chief Compliance Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 3E2A4E3507554909B2E6
 Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 330.00
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 194 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)
A. Patricia A. Savitsky

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation SVP & Chief Compliance Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : D17E3134F8534D4F8042

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Paul J. Scaglione

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Enterprise Proj Mgmt Office

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : 11A25D0E3FAE486FBC94

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Paul J. Scaglione

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Enterprise Proj Mgmt Office

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : 1E10E4415B804EDA9E58

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 195 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Health Care Service Corporation Employees' Political Action Committee

A. Diane Schirf
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Ld Marketing Comm Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : F7D5DEF9C7BF4DC6895C
 Amount of Each Receipt this Period
20.00

B. Diane Schirf
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Ld Marketing Comm Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : D684EBE536FF4527A163
 Amount of Each Receipt this Period
20.00

C. Lynn Marie Schmidt
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Exec Dir HR Strategic Bus Part
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 9F9584B58F334564ABEC
 Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... **70.00**
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 196 OF 254
	<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	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Lynn Marie Schmidt
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Exec Dir HR Strategic Bus Part

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 274269CD3C654AC798AB

Amount of Each Receipt this Period **30.00**

B. Joelle Anne Schmitz
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir Health Policy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 2FF48BB81B2C4241B73E

Amount of Each Receipt this Period **30.00**

C. Joelle Anne Schmitz
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir Health Policy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 2947FFED930643D38438

Amount of Each Receipt this Period **30.00**

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: PAGE 197 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Jennifer M. Schneider
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Process Consultant III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 651AF7F3EC204AFB8DC
 Amount of Each Receipt this Period
 20.00

B. Jennifer M. Schneider
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Process Consultant III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : A466F8741B74485A9585
 Amount of Each Receipt this Period
 20.00

C. Leonard Servedio
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Information Systems DVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : B7E178C9293E490FB738
 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 198 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Leonard Servedio
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Information Systems DVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 97E5513CE891457EA946
 Amount of Each Receipt this Period 20.00

B. Randy C. Shaffer
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sales DVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 12 / 2015
Transaction ID : D2BADAD2E2774D8DBBDI
 Amount of Each Receipt this Period 70.00

C. Randy C. Shaffer
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sales DVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 740946CD2EB440AD88B7
 Amount of Each Receipt this Period 70.00

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 199 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Kurt B. Shipley
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation President NM Division

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2496.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 3FED41B57F4C410F987C

Amount of Each Receipt this Period 192.00

B. Kurt B. Shipley
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation President NM Division

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2496.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 8F05C456D7554CF597A1

Amount of Each Receipt this Period 192.00

C. Kenneth D. Shuler
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Dir-SSD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : FB94790723F0407EB315

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 404.00

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 200 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Kenneth D. Shuler
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Dir-SSD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : F06F9D8EAF344C6EA00E

Amount of Each Receipt this Period
 20.00

B. Christine Brown Siddle
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir Corporate Payroll Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : 6DD536B1F87B4B67B495

Amount of Each Receipt this Period
 35.00

C. Christine Brown Siddle
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir Corporate Payroll Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : 129C827981DC4B19B472

Amount of Each Receipt this Period
 35.00

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 201 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Joseph L. Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Clinical Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : B4E1E257293D468CB96E
 Amount of Each Receipt this Period
 20.00

B. Joseph L. Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Clinical Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : 8AC63E69E60F4A15AF93
 Amount of Each Receipt this Period
 20.00

C. Maurice Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Cross and Blue Shield of Illinois Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1538.48

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 4F1AA5023A8D49AB8B35
 Amount of Each Receipt this Period
 192.31

SUBTOTAL of Receipts This Page (optional).....	232.31
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 202 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Maurice Smith
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Blue Cross and Blue Shield of Illinois Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1538.48

Date of Receipt 06 / 26 / 2015
Transaction ID : BBDD18956F424DFBBD5F

Amount of Each Receipt this Period 192.31

B. Brian Snell
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr. Dir National Accounts Sale

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 926833E41F7D47DE8E5A

Amount of Each Receipt this Period 20.00

C. Brian Snell
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr. Dir National Accounts Sale

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 50305F6341554073A125

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 232.31

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 203 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Kayla Loretta Snowden
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Enterpr Creden /Tx Prov
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 1CA4646B70B04F50AD20
 Amount of Each Receipt this Period
 30.00

B. Kayla Loretta Snowden
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Enterpr Creden /Tx Prov
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : A701365EDE1B44FBAD8F
 Amount of Each Receipt this Period
 30.00

C. Cynthia M. Soza
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Mid Market Account Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : CE4C5C721D434B8491B9
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
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 204 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Cynthia M. Soza
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Mid Market Account Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **455.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : CE83631B770A46C9B242
 Amount of Each Receipt this Period **35.00**

B. Deborah L. Spake-Goodnight
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Project Management Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : E9DAA56A611F462F9ABB
 Amount of Each Receipt this Period **20.00**

C. Deborah L. Spake-Goodnight
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Project Management Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 66284A6418D444FFA47B
 Amount of Each Receipt this Period **20.00**

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 205 OF 254
	<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	<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)
Health Care Service Corporation Employees' Political Action Committee

A. James Spencer
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Manager
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1105.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : F1B72E1ECA414CBA88D4
Amount of Each Receipt this Period **85.00**

B. James Spencer
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Manager
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1105.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 02D3F9F5AAD74E0CB894
Amount of Each Receipt this Period **85.00**

C. Randy L. Starns
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Student Health Marketing DVP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **910.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 4BE0F1429C104A69AD9E
Amount of Each Receipt this Period **70.00**

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 206 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Randy L. Starns
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Student Health Marketing DVP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 7F3A27FA0D94425C968B
Amount of Each Receipt this Period 70.00

B. Barbara S. Stefan
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Asst General Counsel III
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 12 / 2015
Transaction ID : CFFFB93B186F4EA09270
Amount of Each Receipt this Period 70.00

C. Barbara S. Stefan
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Asst General Counsel III
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 6B792A3CE08146119990
Amount of Each Receipt this Period 70.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00
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 207 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial) A. Paula A. Steiner		Date of Receipt 06 / 12 / 2015 Transaction ID : E1CC63E771CD4FE88061
Mailing Address 300 E. Randolph St		Amount of Each Receipt this Period 192.00
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C		
Name of Employer Health Care Service Corporation	Occupation EVP Mkt Retail & Chief Str Off	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00	

Full Name (Last, First, Middle Initial) B. Paula A. Steiner		Date of Receipt 06 / 26 / 2015 Transaction ID : BF940FE174CE4CF6983F
Mailing Address 300 E. Randolph St		Amount of Each Receipt this Period 192.00
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C		
Name of Employer Health Care Service Corporation	Occupation EVP Mkt Retail & Chief Str Off	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00	

Full Name (Last, First, Middle Initial) C. Thomas A. Stewart		Date of Receipt 06 / 12 / 2015 Transaction ID : EA56548F3E9E4744AC81
Mailing Address 300 E. Randolph St		Amount of Each Receipt this Period 20.00
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C		
Name of Employer Health Care Service Corporation	Occupation Dir Mid Market Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional).....▶	404.00
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 208 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)
A. Thomas A. Stewart

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir Mid Market Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : F6014FC26E2647E9BBAB

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Brenda A. Stoddard

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Sol Del & Cust Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : 81C6956287314642B7A1

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Brenda A. Stoddard

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Sol Del & Cust Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : 43A3727F9449423C8987

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 209 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Aisha Shani Stone-Corr
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Condition Management Coord III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : CB42E1B7C9E94951966B
 Amount of Each Receipt this Period
 20.00

B. Aisha Shani Stone-Corr
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Condition Management Coord III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : CB12D5555D974F818298
 Amount of Each Receipt this Period
 20.00

C. Charles Campbell Stuart
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Texas Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1105.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 964A79676281451B9C5A
 Amount of Each Receipt this Period
 85.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 210 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Charles Campbell Stuart
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Texas Government Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1105.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 2498C2F7FF034A9899AF
 Amount of Each Receipt this Period **85.00**

B. Dena Stukenberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Proposals & Enrollment
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 92C64E24DB3F4A41B124
 Amount of Each Receipt this Period **20.00**

C. Dena Stukenberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Proposals & Enrollment
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 40FA61E1AAE14D058891
 Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... **125.00**
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 211 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. J. Michael Sullivan
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Strategic Marketing Ops TX DVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1105.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : EE0E2B02CF474315AC14

Amount of Each Receipt this Period **85.00**

B. J. Michael Sullivan
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Strategic Marketing Ops TX DVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1105.00**

Date of Receipt **06 / 26 / 2015**

Transaction ID : 7FCBBF5AF3C14F11881E

Amount of Each Receipt this Period **85.00**

C. Stephanie A. Summerall
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir Provider Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : 46C52E7BA9D84F17A3DE

Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... **190.00**

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 212 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Stephanie A. Summerall
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Provider Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 3224AAC4ECCC4FA8B668
 Amount of Each Receipt this Period 200.00

B. Thomas J. Surin
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Exec Dir Budgets & Cost Acct
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 57B5A8A0D9DC47F991DF
 Amount of Each Receipt this Period 40.00

C. Thomas J. Surin
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Exec Dir Budgets & Cost Acct
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 84E1CF277F9545C9852B
 Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
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 213 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial) A. Gael G. Syoen			Date of Receipt
Mailing Address 300 E. Randolph St			<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : E1C2A6FD69734BEC865A
Chicago	IL	60601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="38.50"/>
Name of Employer	Occupation		
Health Care Service Corporation	Sr Dir Engineering/Construct		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.50"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Gael G. Syoen			Date of Receipt
Mailing Address 300 E. Randolph St			<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : EEEF168AB3834955B8A8
Chicago	IL	60601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="38.50"/>
Name of Employer	Occupation		
Health Care Service Corporation	Sr Dir Engineering/Construct		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.50"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Matt J. Tevenan			Date of Receipt
Mailing Address 300 E. Randolph St			<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : AE264504D0454E89AE02
Chicago	IL	60601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="35.00"/>
Name of Employer	Occupation		
Health Care Service Corporation	Exec Dir Facilities & Const		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="290.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="112.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 214 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)
A. Matt J. Tevenan

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Exec Dir Facilities & Const

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **290.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : 2E7A6E21C3884D89AF12

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
B. Stephen P. Thompson

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP SDO Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **455.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : BA6172BEDBF948849866

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
C. Stephen P. Thompson

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP SDO Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **455.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : 3CBEF545226B431CBB1A

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ► **105.00**

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 215 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)
A. John T. Tighe

Mailing Address 300 E. Randolph St

City State Zip Code
 Chicago IL 60601

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

Name of Employer Occupation
 Health Care Service Corporation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2496.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 0013588DD82142129B31

Amount of Each Receipt this Period
 192.00

Full Name (Last, First, Middle Initial)
B. John T. Tighe

Mailing Address 300 E. Randolph St

City State Zip Code
 Chicago IL 60601

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

Name of Employer Occupation
 Health Care Service Corporation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2496.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : 1FED28AC7BB646B09097

Amount of Each Receipt this Period
 192.00

Full Name (Last, First, Middle Initial)
C. Jeffrey R. Tikkanen

Mailing Address 300 E. Randolph St

City State Zip Code
 Chicago IL 60601

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

Name of Employer Occupation
 Health Care Service Corporation President Retail Markets

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2496.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : E9B06CA99AF748CB9346

Amount of Each Receipt this Period
 192.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 576.00

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 216 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Jeffrey R. Tikkanen
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation President Retail Markets
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2496.00

Date of Receipt 06 / 26 / 2015
Transaction ID : ADAC3B39805E4A2DA8B5
 Amount of Each Receipt this Period 192.00

B. Christopher S. Toomey
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Application
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 936F3F3E60894E9296BF
 Amount of Each Receipt this Period 20.00

c. Christopher S. Toomey
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Mgr Application
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : FAFEEA51CF1047E5B65C
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 232.00
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 217 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Health Care Service Corporation Employees' Political Action Committee

A. Jose Torres
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : D54E242894C14ABE8D8F
 Amount of Each Receipt this Period
 20.00

B. Jose Torres
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : 4999248BF9674E3291CD
 Amount of Each Receipt this Period
 20.00

C. Janice M. Torrez
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation DVP NM Ext Aff & COS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 6CF3A874C688476786DC
 Amount of Each Receipt this Period
 70.00

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 218 OF 254
	(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"/> 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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial) A. Janice M. Torrez			Date of Receipt
Mailing Address 300 E. Randolph St			<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : 041F63EAEA414B2A8956
Chicago	IL	60601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="70.00"/>
Name of Employer	Occupation		
Health Care Service Corporation	DVP NM Ext Aff & COS		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="910.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Jack Towsley			Date of Receipt
Mailing Address 300 E. Randolph St			<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : AF79578AB851433C9794
Chicago	IL	60601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="115.00"/>
Name of Employer	Occupation		
Health Care Service Corporation	DSVP TX Health Care Delivery		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1495.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Jack Towsley			Date of Receipt
Mailing Address 300 E. Randolph St			<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : E08AB343F97F45C2AF3D
Chicago	IL	60601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="115.00"/>
Name of Employer	Occupation		
Health Care Service Corporation	DSVP TX Health Care Delivery		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1495.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="300.00"/>
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 219 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Darryl Eugene Trammell
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Sr Mgr Credit Union
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 12 / 2015
Transaction ID : 0907730C900F44FC9894
Amount of Each Receipt this Period
20.00

B. Darryl Eugene Trammell
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Sr Mgr Credit Union
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 26 / 2015
Transaction ID : FB4A84F87AB64BE2A03F
Amount of Each Receipt this Period
20.00

C. Alfred N. Trotter
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Dir Tax Compliance
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 12 / 2015
Transaction ID : 73717BE9091A4C97892F
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: (check only one)	PAGE 220 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Alfred N. Trotter
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Dir Tax Compliance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
06 / 26 / 2015
Transaction ID : 71CB8079A0A64C3DB429

Amount of Each Receipt this Period
20.00

B. Brian Troutman
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Associate Legal Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
06 / 12 / 2015
Transaction ID : D929064D1D334435AFB5

Amount of Each Receipt this Period
20.00

C. Brian Troutman
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Associate Legal Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
06 / 26 / 2015
Transaction ID : 020CFC52F5044061B003

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 221 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Brent B. Tucker
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Asst General Counsel II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : F3FB7784450A43B0981C
 Amount of Each Receipt this Period
 35.00

B. Brent B. Tucker
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Asst General Counsel II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : A096F23A4292438B93C8
 Amount of Each Receipt this Period
 35.00

C. Manika M. Turnbull
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Chief of Staff Illinois Div
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : F531E425CDCC46D38AEE
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
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 222 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Manika M. Turnbull
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Chief of Staff Illinois Div
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 255C5D413DF645818427
 Amount of Each Receipt this Period **30.00**

B. Deborah L. Turner
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Actuarial-Fin Tech Solutio
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : B9A9CA258001451CBCF4
 Amount of Each Receipt this Period **30.00**

C. Deborah L. Turner
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Actuarial-Fin Tech Solutio
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 834BD47FF77B408998D7
 Amount of Each Receipt this Period **30.00**

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: PAGE 223 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Vickie L. Tyas
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Government Pools
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : F4E8D64C42B94336B5B9
 Amount of Each Receipt this Period
 30.00

B. Vickie L. Tyas
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Government Pools
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : C64A51C240BD4D538F0C
 Amount of Each Receipt this Period
 30.00

C. Tami Van Sickle
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation On Site Quality Audit Spec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 7D3A93F5E1374C6FAC40
 Amount of Each Receipt this Period
 20.00

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: (check only one)	PAGE 224 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Tami Van Sickle
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation On Site Quality Audit Spec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : C7AAA37D1C10429A8516

Amount of Each Receipt this Period 200.00

B. Michael P. Vaughn
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Database Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 12 / 2015
Transaction ID : BF369D772A824F9E9E6E

Amount of Each Receipt this Period 30.00

C. Michael P. Vaughn
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Database Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 26 / 2015
Transaction ID : A8E1FDFF9BB2459AA6C1

Amount of Each Receipt this Period 30.00

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: (check only one)	PAGE 225 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Daryl James Veach
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation DSVP Provider Risk Solutions
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1495.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 6853F260694B464D8BDD
 Amount of Each Receipt this Period
 115.00

B. Daryl James Veach
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation DSVP Provider Risk Solutions
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1495.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : CA9A939F3E8D4FE78D76
 Amount of Each Receipt this Period
 115.00

C. Robert R. Velick
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Actuarial-Financial Tec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : 070E2B64563343788E1C
 Amount of Each Receipt this Period
 70.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
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 226 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Robert R. Velick
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Dir Actuarial-Financial Tec
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **910.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 3D8AE4E203E048A09085
 Amount of Each Receipt this Period **70.00**

B. Michelle Vessel
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 920DF464BB15412C85C3
 Amount of Each Receipt this Period **20.00**

C. Michelle Vessel
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 367E636CC59849129399
 Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... **110.00**
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 227 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Mark H. Victry
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Proposal Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 8B57C6278BA14A17A895

Amount of Each Receipt this Period
 20.00

B. Mark H. Victry
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Mgr Proposal Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : 5C6EF177664F4108BF0D

Amount of Each Receipt this Period
 20.00

C. Tamorah S. Vincent
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Mgr Facility Provider Network

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 536ADA635157462A932A

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: (check only one)	PAGE 228 OF 254
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Tamorah S. Vincent
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Mgr Facility Provider Network
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
06 / 26 / 2015
Transaction ID : 82E4AE171829455B9C94
Amount of Each Receipt this Period 200.00

B. Ariana Voigt
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Asst General Counsel III
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 455.00

Date of Receipt
06 / 12 / 2015
Transaction ID : F249771F25E34566B299
Amount of Each Receipt this Period 35.00

C. Ariana Voigt
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Asst General Counsel III
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 455.00

Date of Receipt
06 / 26 / 2015
Transaction ID : DEAA8B9D7AFA4307B9BB
Amount of Each Receipt this Period 35.00

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 229 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Mary Vollkommer
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation DVP Financial Settlements&Sys

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 861F08E3DEEF4162845C

Amount of Each Receipt this Period
 100.00

B. Mary Vollkommer
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation DVP Financial Settlements&Sys

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : 6832B69DF12E4205BCC8

Amount of Each Receipt this Period
 100.00

C. Alicia R. Walker
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Mgr Market Segment Support

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 2ED4CF3F1B6643F0A770

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00

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 230 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Alicia R. Walker
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Mgr Market Segment Support

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 34BAB240D2134E6B9E1B

Amount of Each Receipt this Period 20.00

B. James Edward Walsh
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Chief Actg Off&TransactionDSVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt 06 / 12 / 2015
Transaction ID : C201116C005742F29202

Amount of Each Receipt this Period 60.00

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

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Chief Actg Off&TransactionDSVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt 06 / 26 / 2015
Transaction ID : E898933B1D2843ADBA11

Amount of Each Receipt this Period 60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00

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 231 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Donna S. Ward
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Dir-Quality Improv Prog
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
06 / 12 / 2015
Transaction ID : 552FEFD614AA4F4895DF
Amount of Each Receipt this Period
20.00

B. Donna S. Ward
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Dir-Quality Improv Prog
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
06 / 26 / 2015
Transaction ID : BFD566389AF24B90B474
Amount of Each Receipt this Period
20.00

C. Christopher G. Warneke
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Systems Software Prog Consult
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.00

Date of Receipt
06 / 12 / 2015
Transaction ID : 8BA04CB2359E4E139826
Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 232 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Christopher G. Warneke
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Systems Software Prog Consult
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : E2672D41577C47CFBDEC
 Amount of Each Receipt this Period **30.00**

B. Lisa Wassom
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Subscriber Services
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 65639F6B5044470A85D0
 Amount of Each Receipt this Period **30.00**

C. Lisa Wassom
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Mgr Subscriber Services
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **390.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : 3C8EF52B248D460DA552
 Amount of Each Receipt this Period **30.00**

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: PAGE 233 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Daniel Eugene Weathersby
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Project Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 13B5AA2E087F41F3AF81
 Amount of Each Receipt this Period 30.00

B. Daniel Eugene Weathersby
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sr Project Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 84C39805FEC74C0E92FD
 Amount of Each Receipt this Period 30.00

C. Robin R. Webb
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sales Operations DVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 12 / 2015
Transaction ID : FF10E76E53B346DF9667
 Amount of Each Receipt this Period 70.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00
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 234 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Robin R. Webb
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Sales Operations DVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 26 / 2015
Transaction ID : AA4B69073A2148B1B6DF
 Amount of Each Receipt this Period 70.00

B. Daniel P. Webster
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Perf Based Provider Reimb
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 8CEC9D3187174D09A5AE
 Amount of Each Receipt this Period 20.00

C. Daniel P. Webster
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Dir Perf Based Provider Reimb
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : BE5A98299E2244289626
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 235 OF 254
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Nancy Lynn Weeks
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Dir Maj/Natnl Sales& Acct Mgmt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 4FB4B043CDF146C78EBC
Amount of Each Receipt this Period 30.00

B. Nancy Lynn Weeks
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Dir Maj/Natnl Sales& Acct Mgmt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 342E9A1D487A450A9C6F
Amount of Each Receipt this Period 30.00

C. Alex White
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Sr Provider Network Rep
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : F0A6F9213E6547DB908A
Amount of Each Receipt this Period 20.00

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 236 OF 254
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Alex White
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Sr Provider Network Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : 65AB012CB0E24F7BA053

Amount of Each Receipt this Period
 20.00

B. Joseph Dean Wieser
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation President & CEO - PFC/CBL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : B320FBD76EE54A1EA41D

Amount of Each Receipt this Period
 40.00

C. Joseph Dean Wieser
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation President & CEO - PFC/CBL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : D8507302B3264BF88F48

Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00

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 237 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial) A. Laurence C. Williams		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 12 / 2015
Mailing Address 300 E. Randolph St		Transaction ID : E4DF315D38FD40F989C1
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.00
Name of Employer Health Care Service Corporation	Occupation VP Pricing Actuary -TX	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1105.00	

Full Name (Last, First, Middle Initial) B. Laurence C. Williams		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 26 / 2015
Mailing Address 300 E. Randolph St		Transaction ID : 78174363A5454484BA82
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.00
Name of Employer Health Care Service Corporation	Occupation VP Pricing Actuary -TX	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1105.00	

Full Name (Last, First, Middle Initial) C. Terry L. Williams		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 12 / 2015
Mailing Address 300 E. Randolph St		Transaction ID : AF4A740CEE1D440DB9E8
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Health Care Service Corporation	Occupation Sr Mgr Subscriber Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional).....▶	190.00
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 238 OF 254
<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)
Health Care Service Corporation Employees' Political Action Committee

A. Terry L. Williams
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Sr Mgr Subscriber Services
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 0FCD1496F43948E48403
Amount of Each Receipt this Period 20.00

B. Jane R. Wilson
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Dir Network Performance Mgmt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 12 / 2015
Transaction ID : 40DC1A7653084B8EB2DA
Amount of Each Receipt this Period 20.00

C. Jane R. Wilson
Full Name (Last, First, Middle Initial)
Mailing Address 300 E. Randolph St
City Chicago State IL Zip Code 60601
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Care Service Corporation Occupation Dir Network Performance Mgmt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 26 / 2015
Transaction ID : 44E2CC0C09234FC8AB2A
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: (check only one)	PAGE 239 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Jill A. Wolowitz
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Health Policy Private Mkts
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1105.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 594CED32F79A4A1CA485
 Amount of Each Receipt this Period **85.00**

B. Jill A. Wolowitz
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Health Policy Private Mkts
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1105.00**

Date of Receipt **06 / 26 / 2015**
Transaction ID : B5E4D98D3A664DEF9549
 Amount of Each Receipt this Period **85.00**

C. Freda L Wright
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation VP Enterprise Network Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1105.00**

Date of Receipt **06 / 12 / 2015**
Transaction ID : 6A475B48788641AB846B
 Amount of Each Receipt this Period **85.00**

SUBTOTAL of Receipts This Page (optional).....	255.00
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 240 OF 254
	<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)
Health Care Service Corporation Employees' Political Action Committee

A. Freda L Wright
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation VP Enterprise Network Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1105.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : B10623B7219346AC963C

Amount of Each Receipt this Period
85.00

B. Susan Yeazel
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1495.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : 671C81741A344EAE118

Amount of Each Receipt this Period
115.00

C. Susan Yeazel
Full Name (Last, First, Middle Initial)

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1495.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : 27B72D89551F481F81A4

Amount of Each Receipt this Period
115.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **315.00**

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 241 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)
A. Leann Young
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Behavioral Health Care Coord
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 0E6503C19F1346F1837A
 Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. Leann Young
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Behavioral Health Care Coord
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 26 / 2015
Transaction ID : 3D89009CA08644CAB347
 Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Jerald L. Zarin
 Mailing Address 300 E. Randolph St
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Health Care Service Corporation Occupation Medicaid Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt
 06 / 12 / 2015
Transaction ID : 761683DE431A4427ADFE
 Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
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 242 OF 254
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Health Care Service Corporation Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jerald L. Zarin

Mailing Address 300 E. Randolph St

City Chicago State IL Zip Code 60601

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

Name of Employer Health Care Service Corporation Occupation Medicaid Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt
06 / 26 / 2015

Transaction ID : 19C3A3805D7D47FABC56

Amount of Each Receipt this Period
60.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	40132.76

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Boehner for Speaker

Mailing Address 320 First St., SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
2015 Contribution

011

Category/
Type

Candidate Name

Boehner for Speaker

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) **Contribution**

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2015

Transaction ID : EA11F4A87D37211BFEA

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Cole for Congress

Mailing Address PO Box 722256

City Norman State OK Zip Code 73070

Purpose of Disbursement
2016 Primary

011

Category/
Type

Candidate Name

Thomas Jeffery Cole

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) **Contribution**

State: OK District: 04

Date of Disbursement

MM / DD / YYYY
06 / 22 / 2015

Transaction ID : 270C3DDE36941A3DCBF

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Culberson for Congress

Mailing Address PO Box 41964

City Houston State TX Zip Code 77241

Purpose of Disbursement
2016 Primary

011

Category/
Type

Candidate Name

John Abney Culberson

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) **Contribution**

State: TX District: 07

Date of Disbursement

MM / DD / YYYY
06 / 22 / 2015

Transaction ID : 0EF409BAD786ED7F8DA

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

7500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Dick Durbin

Mailing Address PO Box 1949

City Springfield State IL Zip Code 62705

Purpose of Disbursement
2020 Primary

011

Candidate Name

Richard Joseph Durbin

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: IL District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	5

Transaction ID : 8421B12C03375A27F26

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Friends of Jason Chaffetz

Mailing Address 315 Westfield Circle

City Alpine State UT Zip Code 84004

Purpose of Disbursement
2016 Primary

011

Candidate Name

Jason E. Chaffetz

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: UT District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	5

Transaction ID : 2860BBFCA4BE53F3A24

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Friends of Michelle

Mailing Address PO Box 25422

City Albuquerque State NM Zip Code 87125

Purpose of Disbursement
2016 Primary

011

Candidate Name

Michelle Lujan Grisham

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NM District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	5

Transaction ID : 8F4942D445AB970BD33

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ▶

7	5	0	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

7	5	0	0	.	0	0
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Schumer

Mailing Address 192 Lexington Avenue Suite 1001

City New York State NY Zip Code 10016

Purpose of Disbursement
2016 Primary

011

Candidate Name

Charles E. Schumer

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District:

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2015

Transaction ID : 4B1D235955B4AFF12B3

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. JET PAC

Mailing Address PO Box 2385

City Ottawa State IL Zip Code 61350

Purpose of Disbursement
2015 Contribution

011

Candidate Name

JET PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼ Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2015

Transaction ID : CC3A7ECA2E8316A245F

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. John Carter for Congress

Mailing Address 1717 North Ih-35
Suite 304

City Round Rock State TX Zip Code 78664

Purpose of Disbursement
2016 Primary

011

Candidate Name

John R. Carter

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 31

Date of Disbursement

MM / DD / YYYY
06 / 22 / 2015

Transaction ID : 8F384A689BE6E55C927

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

7500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kay Granger Campaign Fund

Mailing Address 1701 River Run, Suite 1010

City Fort Worth State TX Zip Code 76107

Purpose of Disbursement
2016 Primary

011

Candidate Name

Kay Granger

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 12

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	5

Transaction ID : **BF3D8A71667B752442F**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Kenny Marchant for Congress

Mailing Address PO Box 110187

City Carrollton State TX Zip Code 75011-0187

Purpose of Disbursement
2016 Primary

011

Candidate Name

Kenny Ewell Marchant

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 24

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	1	5

Transaction ID : **0E981154BFC0B855E89**

Amount of Each Disbursement this Period

5	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Michael Burgess for Congress

Mailing Address PO Box 2334

City Denton State TX Zip Code 76202-2334

Purpose of Disbursement
2016 Primary

011

Candidate Name

Michael Clifton Burgess

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	1	5

Transaction ID : **ED6A1857B59B2CD9B6B**

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

8	5	0	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

8	5	0	0	.	0	0
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Quigley for Congress

Mailing Address 2652 N Southport Avenue
Unit E

City Chicago State IL Zip Code 60614

Purpose of Disbursement
2016 Primary

011

Candidate Name

Michael Quigley

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IL District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	5

Transaction ID : 5760685135AE992253B

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Rodney for Congress

Mailing Address PO Box 344

City Taylorville State IL Zip Code 62568-0344

Purpose of Disbursement
2016 Primary

011

Candidate Name

Rodney Lee Davis

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IL District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	5

Transaction ID : E8569FBC3DBE7D0905B

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Roskam for Congress Committee

Mailing Address PO Box 713

City Wheaton State IL Zip Code 60187

Purpose of Disbursement
2016 Primary

011

Candidate Name

Peter James Roskam

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IL District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	5

Transaction ID : 94A3680DFC46C0AEFB6

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

4	5	0	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

4	5	0	0	.	0	0
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Steve Daines for Montana

Mailing Address PO Box 1598

City Helena State MT Zip Code 59624-1598

Purpose of Disbursement
2020 Primary

011
Category/
Type

Candidate Name

Steve David Daines

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: MT District:

Date of Disbursement

MM / DD / YYYY
06 / 22 / 2015

Transaction ID : 7F6555BB270215AFC36

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Texans for Henry Cuellar Congressional Campaign

Mailing Address 1519 Washington Street
Suite 200

City Laredo State TX Zip Code 78040

Purpose of Disbursement
2016 Primary

011
Category/
Type

Candidate Name

Henry Roberto Cuellar

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 28

Date of Disbursement

MM / DD / YYYY
06 / 22 / 2015

Transaction ID : 60A72731D4DA62AA7E0

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Udall for US All

Mailing Address PO Box 25766

City Albuquerque State NM Zip Code 87125

Purpose of Disbursement
2020 Primary

011
Category/
Type

Candidate Name

Tom Stewart Udall

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: NM District:

Date of Disbursement

MM / DD / YYYY
06 / 22 / 2015

Transaction ID : C6F555F2AA2431013C7

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

7500.00

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

43000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Biss for Illinois

Mailing Address PO Box 7026

City Evanston State IL Zip Code 60204

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2015

Transaction ID : 25D252D87BC1895F95A

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Carol's List

Mailing Address P.O. Box 1447

City Helena State MT Zip Code 59624

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2015

Transaction ID : 8B073428F6480E6EEFC

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Citizens for Haine

Mailing Address PO Box 67

City Alton State IL Zip Code 62002

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2015

Transaction ID : E30655A5CAAC4B686E4

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

7000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Citizens for Sara Feigenholtz

Mailing Address 3213 N Wilton Ave. Apt. A

City Chicago State IL Zip Code 60657

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2015

Transaction ID : DD26749DB32AF9CB5E9

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Committee for Frank J Mautino

Mailing Address PO Box 36

City Spring Valley State IL Zip Code 61362

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2015

Transaction ID : 706959551B526B0C7AA

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Friends for State Rep Anthony DeLuca

Mailing Address 852 Mackler Dr.

City Chicago Heights State IL Zip Code 60411

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2015

Transaction ID : A2C9A96BED89CA70D3A

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

7500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends for Verschoore

Mailing Address 4600 46th Ave.

City State Zip Code
Rock Island IL 61201

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2015

Transaction ID : 308818C54605F210E66

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Dan Newberry 2016

Mailing Address PO Box 700238

City State Zip Code
Tulsa OK 74107

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 22 / 2015

Transaction ID : 312550A0E42C25C34B6

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Friends of Heather Steans

Mailing Address 50 E Washington St.

City State Zip Code
Chicago IL 60602

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2015

Transaction ID : B5CA7B9173838E99C83

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

4500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of John Sullivan

Mailing Address 926 Broadway

City Quincy State IL Zip Code 62301

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2015

Transaction ID : 9E08EBB9DB90320EBF0

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Friends of Toi Hutchinson

Mailing Address PO Box 101

City Steger State IL Zip Code 60477

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2015

Transaction ID : C99361B488A46AA4D7E

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Gary Forby Campaign Fund

Mailing Address PO Box 966

City Benton State IL Zip Code 62812

Purpose of Disbursement
Nonfederal Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2015

Transaction ID : 6916E68A0462D9C3D8D

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

4500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Montana Republican Party

Mailing Address PO Box 935

City Helena State MT Zip Code 59624

Purpose of Disbursement Nonfederal Contribution

011

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2015

Transaction ID : 035B600D2145390F07A

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Nate Gentry for NM House of Representatives

Mailing Address 3716 Andrew Drive NE

City Albuquerque State NM Zip Code 87110

Purpose of Disbursement Nonfederal Contribution

011

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2015

Transaction ID : 982B1140F74F50E5A89

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Taylor for Mayor

Mailing Address P.O. Box 201632

City San Antonio State TX Zip Code 78220

Purpose of Disbursement Nonfederal Contribution

011

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 26 / 2015

Transaction ID : F2E3C50C58DFFAF8712

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

4500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Health Care Service Corporation Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Texans for Joan Huffman

Mailing Address 3375 Westpark Drive Suite 135

City Houston State TX Zip Code 77005

Purpose of Disbursement
VOID

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : 885A15BF5AB5631716A

Amount of Each Disbursement this Period

-1000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

-1000.00

27000.00