

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Blue Cross Blue Shield of Alabama PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		114739.51
(b) Cash on Hand at Beginning of Reporting Period.....	116693.89	
(c) Total Receipts (from Line 19)	6116.01	33070.39
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	122809.90	147809.90
7. Total Disbursements (from Line 31).....	5000.00	30000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	117809.90	117809.90
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

Write or Type Committee Name

Blue Cross Blue Shield of Alabama PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5427.09	24416.83
(ii) Unitemized	688.92	3653.56
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6116.01	28070.39
(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)	6116.01	28070.39
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	5000.00
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)).....▶	6116.01	33070.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6116.01	33070.39

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	30000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	5000.00	30000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5000.00	30000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	6116.01	28070.39
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6116.01	28070.39
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 16
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC

A. Velezis, Michael, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 450 Riverchase Parkway East
 City Birmingham State AL Zip Code 35244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS AL Occupation (for Individual) VP Legal Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt **04 / 30 / 2018**
Transaction ID : PR125562734968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

B. Jarrett, Angela, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 North Jackson Street Suite 202
 City Montgomery State AL Zip Code 36104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUPAC Occupation (for Individual) VP Claims & Benefit Admin
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt **04 / 30 / 2018**
Transaction ID : PR130963534968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

C. Weaver, Darrel, Craig, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 450 Riverchase Parkway East
 City Birmingham State AL Zip Code 35244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUPAC Occupation (for Individual) VP Healthcare Networks Svcs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt **04 / 30 / 2018**
Transaction ID : PR132319634968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

SUBTOTAL of Receipts This Page (optional).....	624.99
TOTAL This Period (last page this line 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 16
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC

A. Keown, Kipp, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 450 Riverchase Parkway East
 City Birmingham State AL Zip Code 35244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUPAC Occupation (for Individual) VP Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt 04 / 30 / 2018
Transaction ID : PR132319734968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

B. Orr, Robert, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1905 Balfour Dr
 City Birmingham State AL Zip Code 35216-2703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) VP Customer Service
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt 04 / 30 / 2018
Transaction ID : PR78822934968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

C. Vines, Timothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 717 Savannah Pl
 City Birmingham State AL Zip Code 35226-3262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) President and CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt 04 / 30 / 2018
Transaction ID : PR78823034968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

SUBTOTAL of Receipts This Page (optional).....	624.99
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC

A. Briggs, Dick, Dowling, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4327 Kennesaw Dr
 City Birmingham State AL Zip Code 35213-3311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Chief Business Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt **04 / 30 / 2018**
Transaction ID : PR78825834968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

B. Carden, Noel, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5783 Cypress Trce
 City Birmingham State AL Zip Code 35244-5481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) VP and Chief Actuary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt **04 / 30 / 2018**
Transaction ID : PR78826334968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

C. Carter, Tony, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 156 Stonegate Dr
 City Birmingham State AL Zip Code 35242-7054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) VP Consumer Insurance Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt **04 / 30 / 2018**
Transaction ID : PR78826434968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

SUBTOTAL of Receipts This Page (optional).....	624.99
TOTAL This Period (last page this line 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 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC

A. Council, Rebekah, Elgin, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 919 38th St S
 City Birmingham State AL Zip Code 35222-3602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) SVP & Chief Marketing Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt **04 / 30 / 2018**
Transaction ID : PR78826934968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

B. DeCroes, Charles, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1392 Belmont Ln
 City Helena State AL Zip Code 35080-4004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) VP Technology Support
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt **04 / 30 / 2018**
Transaction ID : PR78827134968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

C. Dunsmore, Joseph, Edward, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4474 Heritage Park Dr
 City Birmingham State AL Zip Code 35226-4171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Deputy CIO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt **04 / 30 / 2018**
Transaction ID : PR78827634968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	624.99
TOTAL This Period (last page this line 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 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC

A. Edwards, Brian, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 Eagle Cove Dr
 City Pelham State AL Zip Code 35124-2223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) VP Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt **04 / 30 / 2018**
Transaction ID : PR78827734968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

B. Herringdon, Sheila, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 fox valley highlands cr
 City Maylene State AL Zip Code 35114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) VP Business Development
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt **04 / 30 / 2018**
Transaction ID : PR78829034968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

C. Ingram, Jeffrey, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4008 Charring Cross Ln
 City Birmingham State AL Zip Code 35226-2092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) SVP Health Care Networks
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt **04 / 30 / 2018**
Transaction ID : PR78829234968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	624.99
TOTAL This Period (last page this line 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 16
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC

A. Mackin, Carol, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 809 Royal Ter
 City Birmingham State AL Zip Code 35242-7222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) VP Corp Comm/Community Rel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt 04 / 30 / 2018
Transaction ID : PR78830734968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

B. McIntyre, Douglas, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3489 Birchwood Ln
 City Birmingham State AL Zip Code 35243-4434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) VP Healthcare Network Contract
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt 04 / 30 / 2018
Transaction ID : PR78830934968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

C. Moor, John, Matthew, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 Montcrest Dr
 City Birmingham State AL Zip Code 35213-3022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) VP UTIC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt 04 / 30 / 2018
Transaction ID : PR78831334968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

SUBTOTAL of Receipts This Page (optional).....	624.99
TOTAL This Period (last page this line 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 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC

A. Morrissette, John, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 Amherst Cir
 City Birmingham State AL Zip Code 35216-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Mgr Sales Sup/Nat'l Accts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **04 / 30 / 2018**
Transaction ID : PR78831634968
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

B. Mosko, Ashley, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 503 Olmsted St
 City Birmingham State AL Zip Code 35242-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) VP Health Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt **04 / 30 / 2018**
Transaction ID : PR78831734968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

C. Patterson, Michael, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1809 Lucinda Robey Pl
 City Birmingham State AL Zip Code 35211-3872
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) SVP and Chief Legal Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt **04 / 30 / 2018**
Transaction ID : PR78832034968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

SUBTOTAL of Receipts This Page (optional).....	466.66
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC

A. Platt, David, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3700 Montevallo Rd S
 City Birmingham State AL Zip Code 35213-4208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) Executive Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 219.78

Date of Receipt **04 / 30 / 2018**
Transaction ID : PR78832134968
 Amount of Each Receipt this Period 48.84
 Memo Item
 P/R Deduction (\$24.42 Bi-Weekly)

B. Saxon, Vickie, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4127 Heatherhedge Ln
 City Birmingham State AL Zip Code 35226-2095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) SVP Enterprise Resources
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt **04 / 30 / 2018**
Transaction ID : PR78832734968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

C. Smith, Mary, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5440 Magnolia Trce
 City Birmingham State AL Zip Code 35244-4533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) VP Treasury Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt **04 / 30 / 2018**
Transaction ID : PR78833234968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

SUBTOTAL of Receipts This Page (optional).....	465.50
TOTAL This Period (last page this line 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 16
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC

A. Stone, Joseph, Robin, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3755 Everest Dr
 City Montgomery State AL Zip Code 36106-3336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) VP Governmental Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 04 / 30 / 2018
Transaction ID : PR78833634968
 Amount of Each Receipt this Period 120.00
 Memo Item
 P/R Deduction (\$120.00 Monthly)

B. Vice, Cynthia, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 936 Beech Ln
 City Birmingham State AL Zip Code 35213-2024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) SVP & Chief Financial Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt 04 / 30 / 2018
Transaction ID : PR78834334968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

C. Ward, Brandon, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 Coshatt Trl
 City Birmingham State AL Zip Code 35244-2439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Alabama Occupation (for Individual) VP Business Services
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt 04 / 30 / 2018
Transaction ID : PR78834634968
 Amount of Each Receipt this Period 208.33
 Memo Item
 P/R Deduction (\$208.33 Monthly)

SUBTOTAL of Receipts This Page (optional).....	536.66
TOTAL This Period (last page this line 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 15 OF 16
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hill, James, S, ,

Mailing Address 130 Hampton Drive

City Pelham	State AL	Zip Code 35244
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BCBS AL	Occupation (for Individual) SVP Business Operations
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
833.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2018

Transaction ID : PR94042834968

Amount of Each Receipt this Period
208.33

Memo Item

P/R Deduction (\$208.33 Monthly)

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	208.33
TOTAL This Period (last page this line number only).....	5427.09

**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"/> 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)
Blue Cross Blue Shield of Alabama PAC

Full Name (Last, First, Middle Initial) A. Terri Sewell for Congress			Date of Disbursement M M / D D / Y Y Y Y Y Y 04 / 25 / 2018		
Mailing Address PO Box 1964					
City Birmingham	State AL	Zip Code 35201-1964	FEC Identification Number C 000458976 Transaction ID : 11207558		
Purpose of Disbursement Direct Contribution		Category/Type 011	Amount of Each Disbursement this Period 5000.00 Direct Contribution		
Candidate Name Sewell, Terri, , ,					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: AL District: 07					

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y Y Y		
Mailing Address					
City	State	Zip Code	FEC Identification Number C		
Purpose of Disbursement		Category/Type	Amount of Each Disbursement this Period		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y Y Y		
Mailing Address					
City	State	Zip Code	FEC Identification Number C		
Purpose of Disbursement		Category/Type	Amount of Each Disbursement this Period		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00