REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM

FEB 5 1 29 PM '97

1. NAME OF COMMITTEE (in full)
WellPoint Health Networks Political Action Committee "WELLPAC"

ADDRESS (number and street) ☐ Check if different than previously reported
21555 Oxnard St., WH-1D

CITY, STATE and ZIP CODE
Woodland Hills, CA 91367

2. FEC IDENTIFICATION NUMBER
C00197228

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

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☒ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:

☐ February 20	☐ June 20	☐ October 20
☐ March 20	☐ July 20	☐ November 20
☐ April 20	☐ August 20	☐ December 20
☐ May 20	☐ September 20	☐ January 31

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____ in the State of _____.

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 11/25/96 through 12/31/96		
6. (a) Cash on Hand January 1, 1996		$ 18,200.75
(b) Cash on Hand at Beginning of Reporting Period	$ 10,429.98	
(c) Total Receipts (from Line 19)	$ 6,363.67	$ 57,442.90
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 16,793.65	$ 75,643.65
7. Total Disbursements (from Line 30)	$ 0	$ 58,850.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 16,793.65	$
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
Callen M. Lockett

Signature of Treasurer [signature] Pac Administrator: [signature] Date 1/30/97

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

FEC FORM 3X
(revised 9/93)

FE6AN135

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE WellPoint Health Networks Political Action Committee "WELLPAC"

REPORT COVERING PERIOD FROM 11/25/96 TO: 12/31/96

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	$ 6,363.67	$57,442.90	11(a)(i)
ii. Unitemized	0	0	11(a)(ii)
iii. Total (add i and ii) ➤	$ 6,363.67	$57,442.90	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤			11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	$ 6,363.67	$57,442.90	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤			20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤			21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	$58,850.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	0	$ 58,850.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	0	$58,850.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	$ 6,363.67	$57,442.90	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	$ 6,363.67	$57,442.90	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤			37

FE0AN133

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 24
	FOR LINE NUMBER 11. a. i.

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 of California Political Action Committee C00197228

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Abrams, Shelly R 21655 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	CaliforniaCare Health Plans Occupation: Project Manager Aggregate Year-To-Date: $ $55.00	payroll deduction	$7.50 ($2.50 biweekly)
B. Allen, Charles E 21655 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	CaliforniaCare Health Plans Occupation: Manager Aggregate Year-To-Date: $ $119.60	payroll deduction	$13.60 ($4.60 biweekly)
C. Anderson, Jacqueline A 21655 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	Blue Cross of California Occupation: General Manager Aggregate Year-To-Date: $ $480.22	payroll deduction	$55.41 ($18.47 biweekly)
D. Anderson, Jacqueline A 21655 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	CaliforniaCare Health Plans Occupation: General Manager Aggregate Year-To-Date: $ $760.00	payroll deduction	$90.00 ($30 biweekly)
E. Avery, Richard W 21655 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	Blue Cross of California Occupation: Manager Aggregate Year-To-Date: $ $119.60	payroll deduction	$13.60 ($4.60 biweekly)
F. Baird, Greg B 21655 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	CaliforniaCare Health Plans Occupation: Vice President Aggregate Year-To-Date: $ $1,048.00	payroll deduction	$114.00 ($38.00 biweekly)
G. Barnes, Stephen C 21655 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	CaliforniaCare Health Plans Occupation: Vice President Aggregate Year-To-Date: $ $650.00	payroll deduction	$75.00 ($25.00 biweekly)

SUBTOTAL of Receipts This Page (optional) $369.51

TOTAL This Period (last page this line number only)

FES4N08

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 2 OF 24
	FOR LINE NUMBER 11. a. i.

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NAME OF COMMITTEE (In Full)
Blue Cross of California Political Action Committee C00197228

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Belermann, Jim 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Manager Aggregate Year-To-Date: $	Payroll Deduction $130.00	$15.00 ($5.00 biweekly)
B. Bergman, Lisa 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Regional Sales Manager Aggregate Year-To-Date: $	Payroll Deduction $260.00	$30.00 ($10.00 biweekly)
C. Bernal, Michael A 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Occupation: Manager Aggregate Year-To-Date: $	Payroll Deduction $130.00	$15.00 ($5.00 biweekly)
D. Biglang Awa, Antoinette G 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Occupation: Manager Aggregate Year-To-Date: $	Payroll Deduction $130.00	$15.00 ($5.00 biweekly)
E. Bretall, Russell A 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Director Aggregate Year-To-Date: $	Payroll Deduction $260.00	$30.00 ($10.00 biweekly)
F. Broussard, Dwayne 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	WellPoint Dental Plan Occupation: Supervisor Aggregate Year-To-Date: $	Payroll Deduction $130.00	$15.00 ($5.00 biweekly)
G. Brown, Max 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Senior Vice President Aggregate Year-To-Date: $	Payroll Deduction $390.00	$45.00 ($15.00 biweekly)

SUBTOTAL of Receipts This Page (optional) $165.00

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

FE5AN065

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11. a. i.

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NAME OF COMMITTEE (In Full)
Blue Cross of California Political Action Committee C00197226

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Bryant, Lawrence 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Occupation: Director Aggregate Year-To-Date: $ $130.00	Payroll Deduction	$15.00 ($5.00 biweekly)
B. Buzaid, Lawrence 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Occupation: Senior Counsel Aggregate Year-To-Date: $ $59.80	Payroll Deduction	$5.90 ($2.30 biweekly)
C. Carrillo, Victoria A 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Supervisor Aggregate Year-To-Date: $ $130.00	Payroll Deduction	$15.00 ($5.00 biweekly)
D. Cazenave, Martha Jo 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Occupation: Director Aggregate Year-To-Date: $ $50.00	Payroll Deduction	$0.00
E. Ceasar, Harry R 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Vice President Aggregate Year-To-Date: $ $520.00	Payroll Deduction	$60.00 ($20.00 biweekly)
F. Chakin, Erdogan 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Occupation: Manager Aggregate Year-To-Date: $ $260.00	Payroll Deduction	$30.00 ($10.00 biweekly)
G. Chamberlin, Carol L 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Vice President Aggregate Year-To-Date: $ $230.00	Payroll Deduction	$20.00 ($10.00 biweekly)

SUBTOTAL of Receipts This Page (optional) $126.90

TOTAL This Period (last page this line number only)

FE6A(06)

SCHEDULE A ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Blue Cross of California Political Action Committee C00197228

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Chan, Heidi 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Manager Aggregate Year-To-Date: $ $130.00	Payroll Deduction	$15.00 ($5.00 biweekly)
Choi, April 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Vice President Aggregate Year-To-Date: $ $456.00	Payroll Deduction	$57.00 ($19.00 biweekly)
Cohen, Howard 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Director Aggregate Year-To-Date: $ $390.00	Payroll Deduction	$45.00 ($15.00 biweekly)
Coons, David 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Director Aggregate Year-To-Date: $ $52.00	Payroll Deduction	$6.00 ($2.00 biweekly)
Cota, Alice 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Rating Analyst Aggregate Year-To-Date: $ $130.00	Payroll Deduction	$15.00 ($5.00 biweekly)
Courtemanche, Sheri 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Occupation: Project Administrator Aggregate Year-To-Date: $ $30.00	Payroll Deduction	$0.00
Crippen, Jeffrey L. 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Vice President Aggregate Year-To-Date: $ $520.00	Payroll Deduction	Receipt This Period $60.00 ($20.00 biweekly)

SUBTOTAL of Receipts This Page (optional) $198.00

TOTAL This Period (last page this line number only)

FE8A(06)

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 5 OF 24
	FOR LINE NUMBER 11. a. i.

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NAME OF COMMITTEE (in Full)
Blue Cross of California Political Action Committee C00197228

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Cunningham, Darla 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Director Aggregate Year-To-Date: $ $115.00	Payroll Deduction	$9.20 ($4.60 biweekly)
B. Daye Dibble, Barbara 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Director Aggregate Year-To-Date: $ $239.96	Payroll Deduction	$27.69 ($9.23 biweekly)
C. Decea, Claudia 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Manager Aggregate Year-To-Date: $ $130.00	Payroll Deduction	$15.00 ($6.00 bi-weekly)
D. Donley, Faye 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Vice President Aggregate Year-To-Date: $ $650.00	Payroll Deduction	$75.00 ($25.00 biweekly)
E. Brian Donnelly 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Senior Vice President Aggregate Year-To-Date: $ $519.30	Payroll Deduction	$0.00
F. Dyer, Donnie R 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Vice President Aggregate Year-To-Date: $ $260.00	Payroll Deduction	$30.00 ($10.00 biweekly)
G. Ellis, Robert M 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans General Manager Aggregate Year-To-Date: $ $650.00	Payroll Deduction	$75.00 ($25.00 biweekly)
SUBTOTAL of Receipts This Page (optional)			$231.69
TOTAL This Period (last page this line number only)			

FE5A06S.

SCHEDULE A ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11. a. i.

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NAME OF COMMITTEE (in Full)
Blue Cross of California Political Action Committee C00197228

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Fox, David L 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Name of Employer: CaliforniaCare Health Plans Occupation: Director Aggregate Year-To-Date: $ $120.00	Payroll Deduction	$10.00 ($10.00 biweekly)
B. Freedlund, Camilla 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Name of Employer: Blue Cross of California Occupation: Corporate Communications Manager Aggregate Year-To-Date: $ $260.00	Payroll Deduction	$30.00 ($10.00 biweekly)
C. Galanto, Ruby B 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Name of Employer: Blue Cross of California Occupation: Manager Aggregate Year-To-Date: $ $208.00	Payroll Deduction	$24.00 ($8.00 biweekly)
D. Garner, John P 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Name of Employer: Blue Cross of California Occupation: Senior Vice President Aggregate Year-To-Date: $ $1,123.40	Payroll Deduction	$144.00 ($48.00 biweekly)
E. Givens, Janice E 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Name of Employer: CaliforniaCare Health Plans Occupation: Manager Aggregate Year-To-Date: $ $200.00	Payroll Deduction	$30.00 ($10.00 biweekly)
F. Glickman, Renee M 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Name of Employer: CaliforniaCare Health Plans Occupation: Regional Sales Manager Aggregate Year-To-Date: $ $130.00	Payroll Deduction	$15.00 ($5.00 biweekly)
G. Goldstein, Edward F 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Name of Employer: CaliforniaCare Health Plans Occupation: Senior Programmer Analyst Aggregate Year-To-Date: $ $250.00	Payroll Deduction	$30.00 ($10.00 biweekly)

SUBTOTAL of Receipts This Page (optional) $283.00

TOTAL This Period (last page this line number only)

FEWA009

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 7 OF 24
	FOR LINE NUMBER 11. a. i.

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NAME OF COMMITTEE (In Full)
Blue Cross of California Political Action Committee C00197228

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Griffin, Linda M 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Director Aggregate Year-To-Date: $	Payroll Deduction $18.40	$0.00 ($0.00 biweekly)
B. Halbert, William G 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Vice President Aggregate Year-To-Date: $	Payroll Deduction $215.00	$30.00 ($10.00 biweekly)
C. Haselwood, Dennis L 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Senior Group Underwriter Aggregate Year-To-Date: $	Payroll Deduction $52.00	$6.00 ($2.00 biweekly)
D. Haswell, George R 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	UniCARE Financial Corp. Senior Vice President Aggregate Year-To-Date: $	Payroll Deduction $570.00	$0.00
E. Helwig, David S 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Senior Vice President Aggregate Year-To-Date: $	Payroll Deduction $1,122.00	$144.00 ($48.00 biweekly)
F. Henick, Scott P 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Director Aggregate Year-To-Date: $	Payroll Deduction $260.00	$30.00 ($10.00 biweekly)
G. Higgins, Michael C 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Vice President Aggregate Year-To-Date: $	Payroll Deduction $630.00	$75.00 ($25.00 biweekly)

SUBTOTAL of Receipts This Page (optional) $285.00

1520.00
0.00 $
0.00
FE5AN058 0.00

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 8 OF 24
	FOR LINE NUMBER 11. a. i.

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NAME OF COMMITTEE (In Full)
Blue Cross of California Political Action Committee C00197228

Name	Employer	Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Full Name, Mailing Address and ZIP Code Hohl, Peter 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans	Director	Payroll Deduction	$0.00 ($0.00 biweekly)
		Aggregate Year-To-Date: $	$10.00	
B. Full Name, Mailing Address and ZIP Code Householter, Gene L 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans	General Manager	Payroll Deduction	$75.00 ($25.00 biweekly)
		Aggregate Year-To-Date: $	$650.00	
C. Full Name, Mailing Address and ZIP Code Jackson, William 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	WellPoint Dental Plan	General Manager	Payroll Deduction	$60.00 ($20.00 biweekly)
		Aggregate Year-To-Date: $	$520.00	
D. Full Name, Mailing Address and ZIP Code Jacobson, Ivan 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans	Director	Payroll Deduction	$60.00 ($20.00 biweekly)
		Aggregate Year-To-Date: $	$520.00	
E. Full Name, Mailing Address and ZIP Code Johnson, Patricia L 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans	General Manager	Payroll Deduction	$180.00 ($60.00 biweekly)
		Aggregate Year-To-Date: $	$1,560.00	
F. Full Name, Mailing Address and ZIP Code Jones, Seven 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans	Marketing Research Manager	Payroll Deduction	$6.90 ($2.30 biweekly)
		Aggregate Year-To-Date: $	$59.80	
G. Full Name, Mailing Address and ZIP Code Jordan, Yon Y 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans	Senior Vice President	Payroll Deduction	$90.00 ($30.00 biweekly)
		Aggregate Year-To-Date: $	$710.00	

SUBTOTAL of Receipts This Page (optional) $471.90

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

FE5AN066

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11. a. i.

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NAME OF COMMITTEE (In Full)
Blue Cross of California Political Action Committee C00197228

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Kabeaio, Barbara W 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: UniCARE Financial Corp. Occupation: Manager Aggregate Year-To-Date: $ $52.00	Payroll Deduction	$8.00 ($2.00 biweekly)
B. Kalb, John William 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: UniCARE Financial Corp. Occupation: General Manager Aggregate Year-To-Date: $ $235.00	Payroll Deduction	$30.00 ($10.00 biweekly)
C. Kapustary, Rebecca 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: CaliforniaCare Health Plans Occupation: Senior Vice President Aggregate Year-To-Date: $ $1,256.00	Payroll Deduction	$144.00 ($48.00 biweekly)
D. Kehaly, Pamela D 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: CaliforniaCare Health Plans Occupation: Director Aggregate Year-To-Date: $ $158.00	Payroll Deduction	Receipt This Period $16.00 ($6.00 biweekly)
E. Kellim, Mark 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: CaliforniCare Health Plans Occupation: Manager Aggregate Year-To-Date: $ $260.00	Payroll Deduction	$30.00 ($10.00 biweekly)
F. Khan, Mohammad W 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: CaliforniaCare Health Plans Occupation: Manager Aggregate Year-To-Date: $ $160.70	Payroll Deduction	$20.85 ($8.95 biweekly)
G. Kimoto, Shigeru 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: Blue Cross of California Occupation: Director Aggregate Year-To-Date: $ $420.00	Payroll Deduction	$0.00

SUBTOTAL of Receipts This Page (optional) $248.65

TOTAL This Period (last page this line number only)

FE3A06

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 10 OF 24
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross of California Political Action Committee C00197229

A. Full Name, Mailing Address and ZIP Code Koshiro, Carolyn T 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367	Name of Employer CaliforniaCare Health Plans	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period $6.90
Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Occupation Group Underwriter Aggregate Year-To-Date: $ $59.80		($2.30 biweekly)
B. Full Name, Mailing Address and ZIP Code Kretschmer, R David 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367	Name of Employer CaliforniaCare Health Plans	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period $60.00
Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Occupation Vice President Aggregate Year-To-Date: $ $520.00		(20.00 biweekly)
C. Full Name, Mailing Address and ZIP Code Lachman, Deborah F 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367	Name of Employer CaliforniaCare Health Plans	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period $55.41
Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Occupation General Manager Aggregate Year-To-Date: $ $460.22		($18.47 biweekly)
D. Full Name, Mailing Address and ZIP Code Leslie, John W 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367	Name of Employer CaliforniaCare Health Plans	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period $30.00
Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Occupation Manager Aggregate Year-To-Date: $ $260.00		($10.00 biweekly)
E. Full Name, Mailing Address and ZIP Code Li, Joyce 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367	Name of Employer CaliforniaCare Health Plans	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period $60.00
Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Occupation Vice President Aggregate Year-To-Date: $ $520.00		($20.00 biweekly)
F. Full Name, Mailing Address and ZIP Code Lloyd, Joyce 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367	Name of Employer WellPoint Pharmacy Plan	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period $0.00
Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Occupation Vice President Aggregate Year-To-Date: $ $140.00		
G. Full Name, Mailing Address and ZIP Code Lohnberg, Michael J 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367	Name of Employer Blue Cross of California	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period $55.41
Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Occupation Vice President Aggregate Year-To-Date: $ $460.22		($18.47 biweekly)
SUBTOTAL of Receipts This Page (optional)			$267.72
TOTAL This Period (last page this line number only)			

FPPC/M/08

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 11	OF 24
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NAME OF COMMITTEE (In Full)
Blue Cross of California Political Action Committee C00197228

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Loving, Jim D 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Vice President Aggregate Year-To-Date: $	Payroll Deduction $630.00	$75.00 ($25.00 biweekly)
B. Ludwig, David 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Senior Vice President Aggregate Year-To-Date: $	Payroll Deduction $1,112.00	$96.00 ($48.00 biweekly)
C. Lue, Betty 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Supervisor Aggregate Year-To-Date: $	Payroll Deduction $16.00	$0.00
D. Mahoney, Richard F 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Director Aggregate Year-To-Date: $	Payroll Deduction $130.00	$15.00 ($5.00 biweekly)
E. Malik, Syed A 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Internal Auditor III Aggregate Year-To-Date: $	Payroll Deduction $52.00	$6.00 ($2.00 biweekly)
F. Marshall, Robert A 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Manager Aggregate Year-To-Date: $	Payroll Deduction $260.00	$30.00 ($10.00 biweekly)
G. Mayr, Teresita A 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Vice President Aggregate Year-To-Date: $	Payroll Deduction $553.88	$69.24 ($23.08 biweekly)

SUBTOTAL of Receipts This Page (optional) $339.24

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

FE8AN055

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11. a. i.

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 of California Political Action Committee C00197228

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Mendizabal, Maritza S 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California P.R. Specialist Aggregate Year-To-Date: $ $130.00	Payroll Deduction	$15.00 ($5.00 biweekly)
B. Menke, Scott E 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Supervisor Aggregate Year-To-Date: $ $78.00	Payroll Deduction	$9.00 ($3.00 biweekly)
C. Marcado, Rod P 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Supervisor Aggregate Year-To-Date: $ $130.00	Payroll Deduction	$15.00 ($5.00 biweekly)
D. Merriweather, Brenda L 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Manager Aggregate Year-To-Date: $ $130.00	Payroll Deduction	$15.00 $5.00 biweekly)
E. Michael, Robert D 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Regional Sales Manager Aggregate Year-To-Date: $ $260.00	Payroll Deduction	$30.00 ($10.00 biweekly)
F. Miller, Steven D 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Vice President Aggregate Year-To-Date: $ $130.00	Payroll Deduction	$15.00 ($5.00 biweekly)
G. Molinari, Sylvia A 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Senior Contract Manager Aggregate Year-To-Date: $ $104.00	Payroll Deduction	$12.00 ($4.00 biweekly)

SUBTOTAL of Receipts This Page (optional) $111.00

TOTAL This Period (last page this line number only)

FEMA008

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
Blue Cross of California Political Action Committee C00197228

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Monahan, John P 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans General Manager Aggregate Year-To-Date: $ $120.00	Payroll Deduction	$10.00 ($10.00 biweekly)
B. Monroe, Ann F 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Senior Vice President Aggregate Year-To-Date: $ $260.00	Payroll Deduction	$0.00 $0.00 biweekly)
C. Moss, John 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Supervisor Aggregate Year-To-Date: $ $130.00	Payroll Deduction	$15.00 ($5.00 biweekly)
D. Moussa, Sabry A 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Manager Aggregate Year-To-Date: $ $260.00	Payroll Deduction	$30.00 ($10.00 biweekly)
E. Murakami, Doreen 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Executive Benefits Manager Aggregate Year-To-Date: $ $130.00	Payroll Deduction	$15.00 ($5.00 biweekly)
F. Navarro, Joseph 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Vice President Aggregate Year-To-Date: $ $520.00	Payroll Deduction	$60.00 ($20.00 biweekly)
G. Nicastro, Jess 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Director Aggregate Year-To-Date: $ $78.00	Payroll Deduction	$9.00 ($3.00 biweekly)
SUBTOTAL of Receipts This Page (optional)			$139.00
TOTAL This Period (last page this line number only)			

FE5AN008

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 14 OF 24
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NAME OF COMMITTEE (In Full)
Blue Cross of California Political Action Committee C00197226

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. O'Brien, Patrick J 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: UniCARE Financial Corp. Occupation: Vice President Aggregate Year-To-Date: $ $579.00	Payroll Deduction	$72.00 ($24.00 biweekly)
B. Ohlrich, Charlene R 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: Blue Cross of California Occupation: Project Manager Aggregate Year-To-Date: $ $50.00	Payroll Deduction	$0.00
C. Pahl, Linda 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: CaliforniaCare Health Plans Occupation: Vice President Aggregate Year-To-Date: $ $520.00	Payroll Deduction	$80.00 ($20.00 biweekly)
D. Pike, Raymond J 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: UniCARE Financial Corp. Occupation: Vice President Aggregate Year-To-Date: $ $520.00	Payroll Deduction	$80.00 ($20.00 biweekly)
E. Ron Ragland 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: Blue Cross of California Occupation: Insurance Aggregate Year-To-Date: $ $760.00	Payroll Deduction	$114.00 ($36.00 biweekly)
F. Richardson, Sandra M 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: WellPoint Pharmacy Plan Occupation: Technical Services Analyst Aggregate Year-To-Date: $ $115.00	Payroll Deduction	$0.00 biweekly)
G. Roth, William H 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: CaliforniaCare Health Plans Occupation: General Manager Aggregate Year-To-Date: $ $443.28	Payroll Deduction	$55.41 ($18.47 biweekly)

SUBTOTAL of Receipts This Page (optional)	$361.41
TOTAL This Period (last page this line number only)	

FE4A(09)

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 15 OF 24
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NAME OF COMMITTEE (In Full)
Blue Cross of California Political Action Committee C00197228

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Rothermel, Paige D 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	Employer: CaliforniaCare Health Plans Occupation: Project Manager Aggregate Year-To-Date: $ $260.00	Payroll Deduction	$30.00 ($10.00 biweekly)
B. Sances, Margaret E 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	Employer: Blue Cross of California Occupation: Supervisor Aggregate Year-To-Date: $ $260.00	Payroll Deduction	$30.00 ($10.00 biweekly)
C. Schaeffer, Leonard D 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	Employer: Blue Cross of California Occupation: Chairman Aggregate Year-To-Date: $ $1,300.00	Payroll Deduction	$150.00 ($50.00 biweekly)
D. 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	Employer: Occupation: Aggregate Year-To-Date: $	Payroll Deduction	
E. Shakman, Robert A 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	Employer: Blue Cross of California Occupation: Vice President Aggregate Year-To-Date: $ $150.00	Payroll Deduction	$0.00
F. Shaw, John C 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	Employer: CaliforniaCare Health Plans Occupation: Executive Vice President Aggregate Year-To-Date: $ $1,250.00	Payroll Deduction	$150.00 ($50.00 biweekly)
G. Sheridan, Sue E 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	Employer: CaliforniaCare Health Plans Occupation: Manager Aggregate Year-To-Date: $ $130.00	Payroll Deduction	$15.00 ($5.00 biweekly)

SUBTOTAL of Receipts This Page (optional) $375.00

TOTAL This Period (last page this line number only)

FEIAH006

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11. a. i.

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NAME OF COMMITTEE (In Full)
Blue Cross of California Political Action Committee C00197228

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Sicuro, Michael A 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Occupation: Vice President Aggregate Year-To-Date: $ $45.00	Payroll Deduction	$0.00 $0.00 biweekly)
B. Smith, Karen 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Supervisor Aggregate Year-To-Date: $ $130.00	Payroll Deduction	$15.00 ($5.00 biweekly)
C. Full Name, Mailing Address and ZIP Code 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-To-Date: $	Payroll Deduction	Amount of Each Receipt This Period (biweekly)
D. Sperber, Ray R 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Director Aggregate Year-To-Date: $ $260.00	Payroll Deduction	$30.00 ($10.00 biweekly)
E. Steinhoff, George R 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Director Aggregate Year-To-Date: $ $554.00	Payroll Deduction	$72.00 ($24.00 biweekly)
F. Stevens, Sharon M 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Manager Aggregate Year-To-Date: $ $65.00	Payroll Deduction	$7.50 ($2.50 biweekly)
G. Storey, Peggy A 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Director Aggregate Year-To-Date: $ $300.30	Payroll Deduction	$34.65 ($11.55 biweekly)

SUBTOTAL of Receipts This Page (optional) $159.15

TOTAL This Period (last page this line number only)

FE4A(04)

SCHEDULE A **ITEMIZED RECEIPTS**

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

NAME OF COMMITTEE (in Full)
Blue Cross of California Political Action Committee C00197228

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Susterich, Robert W 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Occupation: Manager Aggregate Year-To-Date: $ $250.00	Payroll Deduction	$30.00 ($10.00 biweekly)
B. Sweeney, Zivia W 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Vice President Aggregate Year-To-Date: $ $90.00	Payroll Deduction	$0.00
C. Sze, Shwu-Fen 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Director Aggregate Year-To-Date: $ $390.00	Payroll Deduction	$45.00 ($15.00 biweekly)
D. Tanton, Dave 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: General Manager Aggregate Year-To-Date: $ $650.00	Payroll Deduction	$75.00 ($25.00 biweekly)
E. Theodore, Laura Pilar 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Quality Management Analyst Aggregate Year-To-Date: $ $130.00	Payroll Deduction	$15.00 ($5.00 biweekly)
F. Thomas, Karen 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: Vice President Aggregate Year-To-Date: $ $265.00	Payroll Deduction	$0.00
G. Tilford, David M 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	CaliforniaCare Health Plans Occupation: General Manager Aggregate Year-To-Date: $ $16.47	Payroll Deduction	$0.00
SUBTOTAL of Receipts This Page (optional)			$165.00
TOTAL This Period (last page this line number only)			

FESAN085

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 18 OF 24
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NAME OF COMMITTEE (In Full)
Blue Cross of California Political Action Committee C00197228

Name	Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Full Name, Mailing Address and ZIP Code Trainor, Robert J 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: Blue Cross of California Occupation: Manager Aggregate Year-To-Date: $	Payroll Deduction $260.00	$30.-00 ($10.00 biweekly)
B. Full Name, Mailing Address and ZIP Code 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: Occupation: Aggregate Year-To-Date: $	Payroll Deduction	(biweekly)
C. Full Name, Mailing Address and ZIP Code Van Scoyk, Beverly 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: Blue Cross of California Occupation: Director Aggregate Year-To-Date: $	Payroll Deduction $120.00	$0.00 $0.00 biweekly)
D. Full Name, Mailing Address and ZIP Code Vanderbok, Kenneth W 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: Blue Cross of California Occupation: Manager Aggregate Year-To-Date: $	Payroll Deduction $110.00	$0.00
E. Full Name, Mailing Address and ZIP Code Vorrises, Peter D 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: CaliforniaCare Health Plans Occupation: Regional Sales Manager Aggregate Year-To-Date: $	Payroll Deduction $390.00	$45.00 ($15.00 biweekly)
F. Full Name, Mailing Address and ZIP Code Ward, David M 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: Blue Cross of California Occupation: Health Policy Analyst Aggregate Year-To-Date: $	Payroll Deduction $130.00	$15.00 ($5.00 biweekly)
G. Full Name, Mailing Address and ZIP Code Weinberg, Dennis M 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: CaliforniaCare Health Plans Occupation: Executive Vice President Aggregate Year-To-Date: $	Payroll Deduction $3,550.00	$450.00 ($150.00 biweekly)

SUBTOTAL of Receipts This Page (optional)	$540.00
TOTAL This Period (last page this line number only)	

FE6AN066

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 19 OF 24
	FOR LINE NUMBER 11. a. i.

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NAME OF COMMITTEE (In Full)
Blue Cross of California Political Action Committee C00197228

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Wendt, Edward E 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Name of Employer: CaliforniaCare Occupation: Senior Vice President Aggregate Year-To-Date: $390.00	Payroll Deduction	$0.00 $0.00 biweekly)
B. White, Kathleen R 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Name of Employer: CaliforniaCare Health Plans Occupation: Senior Contract Manager Aggregate Year-To-Date: $130.00	Payroll Deduction	$15.00 ($5.00 biweekly)
C. Wofford, Jeffrey C 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Name of Employer: CaliforniaCare Health Plans Occupation: Vice President Aggregate Year-To-Date: $520.00	Payroll Deduction	$60.00 ($20.00 biweekly)
D. Wolfe, Keith 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Name of Employer: CaliforniaCare Health Plans Occupation: Director Aggregate Year-To-Date: $208.00	Payroll Deduction	$24.00 ($8.00 biweekly)
E. Wolfson, Marcia C 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Name of Employer: CaliforniaCare Health Plans Occupation: Senior Group Underwriter Aggregate Year-To-Date: $130.00	Payroll Deduction	$15.00 ($5.00 biweekly)
F. Zouzounis, Joseph 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Name of Employer: CaliforniaCare Health Plans Occupation: Vice President Aggregate Year-To-Date: $480.22	Payroll Deduction	$55.41 ($18.47 biweekly)
G. Anderson, Robert L 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Name of Employer: Blue Cross of California Occupation: Insurance Aggregate Year-To-Date: $504.00	Payroll Deduction	$72.00 ($24.00 biweekly)

SUBTOTAL of Receipts This Page (optional)	$241.41
TOTAL This Period (last page this line number only)	

FEM0006

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11. a. I.

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NAME OF COMMITTEE (In Full)
Blue Cross of California Political Action Committee C00197228

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Cygul, John 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	Blue Cross of California Occupation: Insurance Aggregate Year-To-Date: $210.00	Payroll Deduction	$30.00 ($10.00 biweekly)
B. Kahn, Nelson 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	Blue Cross of California Occupation: Insurance Aggregate Year-To-Date: $525.00	Payroll Deduction	$75.00 ($25.00 biweekly)
C. Slemon, John F 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	Blue Cross of California Occupation: Insurance Aggregate Year-To-Date: $380.00	Payroll Deduction	$57.00 ($19.00 biweekly)
D. Taylor, Diane 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	Blue Cross of California Occupation: Insurance Aggregate Year-To-Date: $530.00	Payroll Deduction	$45.00 ($15.00 biweekly)
E. Collins, William 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	UniCARE Occupation: General Manager Aggregate Year-To-Date: $1,000.00	3/5/96	$0.00
F. Ducharme, Steven 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	Blue Cross of California Occupation: Insurance Aggregate Year-To-Date: $190.00	Payroll Deduction	$30.00 ($10.00 biweekly
G. Hoops, Timothy F. 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary / General / Other (specify)	Blue Cross of California Occupation: Insurance Aggregate Year-To-Date: $90.00	Payroll Deduction	$15.00 ($5.00 biweekly

SUBTOTAL of Receipts This Page (optional) $252.00

TOTAL This Period (last page this line number only)

FE5AMD66

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)
Blue Cross of California Political Action Committee C00197228

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Kenny, Peter V. 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Blue Cross of California Occupation: Insurance Aggregate Year-To-Date: $190.00	Payroll Deduction	$30.00 ($10.00 biweekly)
B. Phanstiel, Howard 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Blue Cross of California Occupation: Executive Vice President Aggregate Year-To-Date: $ $616.00	Payroll Deduction	$144.00 ($48.00 biweekly)
C. Martin, Marlou 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Blue Cross of California Occupation: Insurance Aggregate Year-To-Date: $ $190.00	Payroll Deduction	$30.00 $10.00 biweekly)
D. Scarlett, Robert E. 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Blue Cross of California Occupation: Director Aggregate Year-To-Date: $ $175.37	Payroll Deduction	$27.69 ($9.23 biweekly)
E. Shankar, Narayan 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Blue Cross of America Occupation: Insurance Aggregate Year-To-Date: $ $10.00	Payroll Deduction	$0.00 $0.00 biweekly)
F. Shih, Jin-Dih 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Blue Cross of California Occupation: Insurance Aggregate Year-To-Date: $ $85.00	Payroll Deduction	$15.00 $5.00 biweekly)
G. Simmons, Rickey D. 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Blue Cross of California Occupation: Insurance Aggregate Year-To-Date: $ $90.00	Payroll Deduction	$30.00 ($10.00 biweekly)

SUBTOTAL of Receipts This Page (optional) $276.69

TOTAL This Period (last page this line number only)

FEMAN066

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 22 OF 24
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NAME OF COMMITTEE (In Full)
Blue Cross of California Political Action Committee C00197228

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Sofen, Joan R. 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Occupation: Insurance Aggregate Year-To-Date: $285.00	Payroll Deduction	$45.00 ($15.00 biweekly)
B. Waldie, Kandy 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Occupation: Insurance Aggregate Year-To-Date: $ $323.00	Payroll Deduction	$57.00 ($19.00 biweekly)
C. Ott, Jesse 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Occupation: Manager Aggregate Year-To-Date: $ $100.00	5/11/96	$0.00
D. Williams, Ronald A. 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Occupation: President Aggregate Year-To-Date: $ $2,000.00	4/15/96	$0.00
E. Bosworth, Stephen R. 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of America Manager Aggregate Year-To-Date: $ $225.00	Payroll Deduction	$75.00 ($25.00 biweekly)
F. Kasal, Candice Y. 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Occupation: Manager Aggregate Year-To-Date: $216.00	Payroll Deduction	$72.00 ($24.00 biweekly)
G. Lynch, Barbara 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Occupation: Manager Aggregate Year-To-Date: $ $110.00	Payroll Deduction	$30.00 ($10.00 biweekly)
SUBTOTAL of Receipts This Page (optional)			$279.00
TOTAL This Period (last page this line number only)			

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SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 23 OF 24
	FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)
Blue Cross of California Political Action Committee C00197228

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Miller, James E. 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Blue Cross of California Occupation: Manager Aggregate Year-To-Date: $500.00	Payroll Deduction	$150.00 ($50.00 biweekly)
B. Muse, Charles F. 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Blue Cross of California Occupation: Insurance Aggregate Year-To-Date: $80.00	Payroll Deduction	$30.00 ($10.00 biweekly)
C. Paczkowski, Donald P. 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Blue Cross of California Occupation: Manager Aggregate Year-To-Date: $270.00	Payroll Deduction	$90.00 ($30.00 biweekly)
D. Volpe, Lane C. 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Blue Cross of California Occupation: Director Aggregate Year-To-Date: $200.00	Payroll Deduction	$60.00 ($20.00 biweekly)
E. Asaro, Anthony 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Blue Cross of America Occupation: Manager Aggregate Year-To-Date: $100.00	3/19/96	$0.00
F. Lockett, Callen 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Blue Cross of California Occupation: Director Aggregate Year-To-Date: $470.00	6/17/96	$0.00
G. Jarvis, Jane 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: Primary General Other (specify)	Blue Cross of California Occupation: Vice President Aggregate Year-To-Date: 750.00	3/11/96	$0.00
SUBTOTAL of Receipts This Page (optional)			$330.00
TOTAL This Period (last page this line number only)			

FESA1066

SCHEDULE A ITEMIZED RECEIPTS

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

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FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)
Blue Cross of California Political Action Committee C00197228

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. Feders, Danielle 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Occupation: Vice President Aggregate Year-To-Date: $250.00	9/17/98	
B. Morrison, Andrew 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Occupation: Director Aggregate Year-To-Date: $80.00	Payroll Deduction	$60.00 ($20.00 biweekly)
C. Waldron, Neil J. 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Occupation: Aggregate Year-To-Date: $116.00	Payroll Deduction	$87.00 ($29.00 biweekly)
D. Salvatore, Lorraine 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Occupation: Aggregate Year-To-Date: $100.00	7/1/98	
E. Jervis, Jane 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Blue Cross of California Occupation: Aggregate Year-To-Date: $750.00	3/11/96	
F. 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: Occupation: Aggregate Year-To-Date:	Date (month, day, year):	Amount of Each Receipt This Period
G. 21555 Oxnard Street, BCCPAC Woodland Hills, CA 91367 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer: Occupation: Aggregate Year-To-Date:	Date (month, day, year):	Amount of Each Receipt This Period

SUBTOTAL of Receipts This Page (optional) $147.00

TOTAL This Period (last page this line number only) $6363.67

FESA98B

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER

NO DISBURSEMENTS FOR THIS REPORTING PERIOD

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NAME OF COMMITTEE (In Full)

Blue Cross of California Political Action Committee C00197228

A. Full Name, Mailing Address and ZIP Code NO DISBURSEMENTS FOR THIS PERIOD	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
SUBTOTAL of Disbursements This Page (optional)			
TOTAL This Period (last page this line number only)			

FE6AN088

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 1-30-97
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

PREPARER

2-5-97
DATE PREPARED

FEC FORM 70-2 (12/92)