Image# 202107069450982581					PAGE 1 / 34
FEC AN	EPORT OF R ND DISBURS Other Than An Autho	<b>SEMENT</b>	s	Office U	se Only
1. NAME OF TYP	E OR PRINT ▼	Example: If typi	ng, type		
COMMITTEE (in full)		over the lines.	1	2FE4M5	
Louisiana Health Service	& Indemnity Compa	Iny DBA Blue	Cross & Bl	ue Shield of Lo	ouisiana PAC
ADDRESS (number and street)	525 Reitz Avenue				
Check if different					
then providually	Baton Rouge			LA 70809	9
2. FEC IDENTIFICATION NUMB	ER V CITY	<b></b>	STA		ZIP CODE
C C00651265	3. IS 1 REF	· · ·	NEW (N) <b>OR</b>	AMENDED (A)	
<ul> <li><b>4. TYPE OF REPORT</b> (Choose One)</li> <li>(a) Quarterly Reports:</li> </ul>	(b) Monthly Report Due On: Mar 20		May 20 (M5) Jun 20 (M6)	Aug 20 (M8) Sep 20 (M9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election
April 15	Apr 20	(M4)	Jul 20 (M7)	Oct 20 (M10)	Year Only) Jan 31 (YE)
Quarterly Report (Q1)	(c) 12-Day	Primary (12F	P)	General (12G)	Runoff (12R)
Quarterly Report (Q2) October 15	PRE-Election Report for the:	Convention	(12C)	Special (12S)	
Quarterly Report (Q3) January 31		M M /	D D / Y	YYYY	in the
Year-End Report (YE) July 31 Mid-Year	(d) 30-Day	on			State of
Report (Non-election Year Only) (MY)	POST-Election Report for the:	General (300	G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Election	on/	D D / Y	YYYY	in the State of
5. Covering Period	01 / Y Y Y Y 01 2021	through	06 /	D     D     /     Y     Y       30     20	21
I certify that I have examined this R	eport and to the best of m Camerlinck, Bryan, , ,	y knowledge and	belief it is true,	correct and comple	te.
Type or Print Name of Treasurer					
Signature of Treasurer	k, Bryan, , ,	[Electronicall	y Filed] Date		D / Y Y Y Y 2021
NOTE: Submission of false, erroneous	, or incomplete information r	nay subject the per	son signing this	Report to the penalti	es of 52 U.S.C. § 3010
Office Use Only					<b>FORM 3X</b> Rev. 05/2016

07/06/2021 10 : 21

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

10627.04

64129.18

2500.00

61629.18

Write or Type Committee Name

		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
L	ouis	iana Health Ser	vice & Inde	nity Company DBA Blue Cross &	Blue Shield of Louisiana PAC
Re	eport (	Covering the Period:	From:	03 01 / Y Y Y Y 2021 T	To: 06 / 06 / 2021
				COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) (	Cash on Hand	YYYYY		

55219.70

7909.48

63129.18

1500.00

61629.18

(b)	Cash on Hand at	-	-	-		-
	Beginning of Reporting Period	L			-7	

(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....

(c) Total Receipts (from Line 19) .....

- 7. Total Disbursements (from Line 31).....
- Cash on Hand at Close of 8. Reporting Period (subtract Line 7 from Line 6(d)).....
- Debts and Obligations Owed TO 9. the Committee (Itemize all on Schedule C and/or Schedule D) .....

x

- 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....
- 0.00 0.00
  - This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

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

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

#### DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Report Covering the Period: From:	01 / Y Y Y Y 2021 To	b: 06 / 0 / Y Y Y Y 2021
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<ol> <li>Contributions (other than loans) From:         <ul> <li>(a) Individuals/Persons Other</li> <li>Than Political Committees</li> </ul> </li> </ol>		
(i) Itemized (use Schedule A)	4937.35	4937.35
(ii) Unitemized	2972.13	5689.69
(iii) TOTAL (add Lines 11(a)(i) and (ii)►	7909.48	10627.04
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
<ul> <li>(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)</li> </ul>	7909.48	10627.04
2. Transfers From Affiliated/Other Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
<ol> <li>Loan Repayments Received</li> <li>Offsets To Operating Expenditures</li> </ol>	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
to Federal Candidates and Other Political Committees	0.00	0.00
Other Federal Receipts     (Dividends, Interest, etc.)     Transfers from Non-Federal and Levin Funds	0.00	0.00
(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
<ul> <li>D. Total Receipts (add Lines 11(d),</li> <li>12, 13, 14, 15, 16, 17, and 18(c))</li> </ul>	7909.48	10627.04
) Total Federal Receipts		

 Total Federal Receipts (subtract Line 18(c) from Line 19)....... 7909.48

Page 3

10627.04

#### DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) Page 4 COLUMN A COLUMN B **II. Disbursements Total This Period Calendar Year-to-Date** 21. Operating Expenditures: Allocated Federal/Non-Federal (a) Activity (from Schedule H4) 0.00 0.00 Federal Share ..... (i) 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures ..... (c) Total Operating Expenditures 0.00 (add 21(a)(i), (a)(ii), and (b)) 0.00 22. Transfers to Affiliated/Other Party Committees..... 0.00 0.00 23 Contributions to Federal Candidates/Committees 2500.00 and Other Political Committees... 1500.00 24. Independent Expenditures (use Schedule E)...... Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... 0.00 0.00 25. 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 19 Loans Made.... Refunds of Contributions To: (a) Individuals/Persons Other 0.00 27. 28. 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees ..... 0.00 0.00 Other Political Committees (c) (such as PACs)..... 0.00 0.00 Total Contribution Refunds (d) (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 Total Federal Election Activity (add (C) 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)).. 1500.00 2500.00 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... 1500.00 2500.00

#### DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

**Total This Period** 

FFC	Form	3X	(Rev	05/2016	)
1 20	1 01111	57	(110 .	05/2010	,

#### III. Net Contributions/ Operating Expenditures

33.	Total Contributions (other than loans)
	(from Line 11(d), page 3)
34.	Total Contribution Refunds
	(from Line 28(d))
35.	Net Contributions (other than loans)
	(subtract Line 34 from Line 33)
36.	Total Federal Operating Expenditures
	(add Line 21(a)(i) and Line 21(b))
37.	Offsets to Operating Expenditures
	(from Line 15, page 3)
38.	Net Operating Expenditures

(subtract Line 37 from Line 36) .....

						7909.48
		-7			-7-	1 485
						0.00
	1	-7	1.	1	-	
		-			-7	7909.48
100						
		-7			7	0.00
100						
		-7-			-7	0.00
						0.00

				1		10627.04
		-7			-7	
						0.00
-	1	-		1	-	0.00
						10627.04
-		7			- 7	1002/101
	1			1		0.00
	1	-7	1	1	-7	1 45 1
	1			1		0.00
-		-7			-7	0.00
				1		0.00
		-7-			-7-	

COLUMN B

Calendar Year-to-Date



SCHEDULE A (FEC Form 3X	()	Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 OF 34 (check only one)			
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\mathbf{X}$ 11a         11b         11c         12           13         14         15         16         17			
			person for the purpose of soliciting contributions see to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Louisiana Health Service & Ir	ndemnity Co	ompany DBA Blue Cro	oss & Blue Shield of Louisiana PAC			
Full Name of Individual (Last, First, Middle A. Barfield, Deirdre, , ,	e Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 715 Coachlight Road			03 26 Y Y Y Y 2021			
City Shreveport	State LA	Zip Code 71106	Transaction ID : SA11AI.7433 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		500.00			
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item			
LHSIC Receipt For:		ior Medical Director	Personal Check			
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00				
Full Name of Individual (Last, First, Middle B. Bourgeois, Tina, , ,	Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 19425 Creek Round Avenu	ue		05 31 2021			
City	State	Zip Code				
Baton Rouge	LA	70817	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		20.84			
Name of Employer (for Individual) LHSIC		upation (for Individual) erprise Info Mgmt	PR Ded			
Receipt For: 2022 ✓ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.40	]			
Full Name of Individual (Last, First, Middle C. Bourgeois, Tina, , ,	Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 19425 Creek Round Aven	ue		06 15 / Y Y Y Y 06 15 2021			
City Baton Rouge	State LA	Zip Code 70817	Transaction ID : SA11AI.7702 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	FEC ID number of contributing					
Name of Employer (for Individual)		upation (for Individual) erprise Info Mgmt	PR Ded			
Receipt For: 2022 Primary General Other (specify)	Aggregate	Year-to-Date ▼ 229.24	]			
SUBTOTAL of Receipts This Page (optional)	)		541.68			

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

\_\_\_\_\_\_\_

FOR LINE NUMBER:

PAGE 7 OF

34

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)       X       11a       11b       11c       12       13       14       15       16       17
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Louisiana Health Service & Inde	emnity Corr	npany DBA Blue Cros	ss & Blue Shield of Louisiana PAC
Full Name of Individual (Last, First, Middle Ini         A.       Bourgeois, Tina, , ,         Mailing Address 19425 Creek Round Avenue         City         Baton Rouge         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         LHSIC         Receipt For: 2022         ✓         Primary         General         Other (specify) ▼	State LA C	Zip Code 70817 ation (for Individual) rise Info Mgmt	Date of Receipt 06 / 30 / 2021 Transaction ID : SA11AI.7746 Amount of Each Receipt this Period 20.84 Memo Item PR Ded
Full Name of Individual (Last, First, Middle Ini         B.       Cross, Gregory, , ,         Mailing Address 10603 Pinebrook Avenue         City         Baton Rouge         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         LHSIC         Receipt For: 2022         X       Primary         General         Other (specify) ▼	State LA C	Zip Code 70809 ation (for Individual) les	Date of Receipt
Full Name of Individual (Last, First, Middle Ini         C. Cross, Gregory, , ,         Mailing Address 10603 Pinebrook Avenue         City         Baton Rouge         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         LHSIC         Receipt For: 2022         X         Primary         General         Other (specify)	State LA C	Zip Code 70809 ation (for Individual) es	Date of Receipt
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		· · ·	62.84

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3	SX)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 OF 34
ITEMIZED RECEIPTS		for each category of the	(check only one)
		Detailed Summary Page	
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
	-		oss & Blue Shield of Louisiana PAC
Full Name of Individual (Last, First, Mide A. Cross, Gregory, , ,	dle Initial) or Full C	organization Name	Date of Receipt
Mailing Address 10603 Pinebrook Avenu			06 / D D / Y Y Y Y 2021
City	State LA	Zip Code 70809	Transaction ID : SA11AI.7745
Baton Rouge		70809	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		21.00
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
LHSIC	VP	Sales	PR Ded
Receipt For: 2022	Aggregate	Year-to-Date ▼	
Primary     General		252.00	
Other (specify) V		232.00	
Full Name of Individual (Last, First, Mide B. Derouen, Lillian, , ,	dle Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 4090 Sycamore Ridge			03 18 2021
City	State	Zip Code	Transaction ID : SA11AI.7431
Zachary	LA	70791	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual) LHSIC		upation (for Individual) ector	Memo Item Personal Check
Receipt For:	Aggregate	Year-to-Date V	
Primary General Other (specify) ▼		500.00	
Full Name of Individual (Last, First, Mide	dle Initial) or Full C	Organization Name	
C. Faulk, Sheldon, , ,			Date of Receipt
Mailing Address 1618 St. Albans			03 15 2021
City	State	Zip Code	Transaction ID : SA11AI.7440
Baton Rouge	LA	70810	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.67
Name of Employer (for Individual) LHSIC		upation (for Individual) 9 Governmental Affairs	PR Ded
Receipt For: 2022 Primary General Other (specify)	Aggregate	Year-to-Date ▼ 208.35	]
SUBTOTAL of Receipts This Page (option	nal)		► 562.67

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

SCHEDULE A (FEC Form 3X)	Use separate schedu	
ITEMIZED RECEIPTS	for each category of Detailed Summary Pa	
or for commercial purposes, other than using		y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Louisiana Health Service & In	demnity Company DBA Blue	e Cross & Blue Shield of Louisiana PAC
Full Name of Individual (Last, First, Middle Faulk, Sheldon, , , Mailing Address 1618 St. Albans	Initial) or Full Organization Name	Date of Receipt
City	State Zip Code	03 31 2021 Transaction ID : SA11AI.7479
Baton Rouge FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 41.67
Name of Employer (for Individual)	Occupation (for Individual) SVP Governmental Affairs	Memo Item PR Ded
Receipt For: 2022	Aggregate Year-to-Date ▼ 250	.02
Full Name of Individual (Last, First, Middle <b>Faulk, Sheldon, , ,</b> Mailing Address 1618 St. Albans	Initial) or Full Organization Name	Date of Receipt
City Baton Rouge	State Zip Code LA 70810	04 15 2021 Transaction ID : SA11AI.7526 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	41.67
Name of Employer (for Individual) LHSIC	Occupation (for Individual) SVP Governmental Affairs	PR Ded
Receipt For: 2022	Aggregate Year-to-Date ▼	.69
Full Name of Individual (Last, First, Middle Faulk, Sheldon, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 1618 St. Albans	State Zip Code	04 / 30 / 2021 Transaction ID : SA11AI.7570
Baton Rouge FEC ID number of contributing	LA 70810	Amount of Each Receipt this Period
federal political committee.	C	41.67
Name of Employer (for Individual) LHSIC Receipt For: 2022	Occupation (for Individual) SVP Governmental Affairs	PR Ded
Primary   General     Other (specify)	Aggregate Year-to-Date ▼	3.36
SUBTOTAL of Receipts This Page (optional).		125.01
TOTAL This Period (last page this line numb	er only)	

FEC Schedule A (Form 3X) Rev. 06/2016

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FOR LINE NUMBER:

PAGE 10 OF

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
	y information copied from such Reports and Sta for commercial purposes, other than using the n			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Louisiana Health Service & Inder	nnity Co	mpany DBA Blue Cros	ss & Blue Shield of Louisiana PAC
Α.	Full Name of Individual (Last, First, Middle Initia Faulk, Sheldon, , , Mailing Address 1618 St. Albans	l) or Full Or	ganization Name	Date of Receipt
	City	State	Zip Code	05 15 2021
	Baton Rouge	LA	70810	Transaction ID : SA11AI.7615 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	LHSIC	SVP	Governmental Affairs	PR Ded
	Receipt For: 2022 ✓ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.03	
			9× 1 /9× 1 /4×	
R	Full Name of Individual (Last, First, Middle Initia Faulk, Sheldon, , ,	l) or Full Or	ganization Name	Date of Receipt
	Mailing Address 1618 St. Albans	05 31 2021		
	City	State	Zip Code	Transaction ID : SA11AI.7659
	Baton Rouge	LA	70810	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) LHSIC		pation (for Individual) Governmental Affairs	Memo Item PR Ded
	Receipt For: 2022 ✓ Primary General Other (specify) ▼			
с.	Full Name of Individual (Last, First, Middle Initia Faulk, Sheldon, , ,	l) or Full Or	ganization Name	Date of Receipt
	Mailing Address 1618 St. Albans			06 15 2021
	City	State	Zip Code	Transaction ID : SA11AI.7703
	Baton Rouge	LA	70810	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) LHSIC		pation (for Individual) Governmental Affairs	PR Ded
	Receipt For: 2022       Image: Primary image: Other (specify)	Aggregate	Year-to-Date ▼ 458.37	
	UBTOTAL of Receipts This Page (optional)			125.01

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#### Image# 202107069450982591

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER:

PAGE 11 OF

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) <b>X</b> 11a 11b 11c 12 13 14 15 16 17
			person for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Louisiana Health Service & Ir	demnity Co	ompany DBA Blue Cro	ss & Blue Shield of Louisiana PAC
Full Name of Individual (Last, First, Middle         A.       Faulk, Sheldon, , ,         Mailing Address 1618 St. Albans         City         Baton Rouge         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         LHSIC         Receipt For: 2022         ✓         Y Primary         General         Other (specify) ▼	State LA C Occ SVI	Drganization Name Zip Code 70810 upation (for Individual) P Governmental Affairs Year-to-Date ▼ 500.04	Date of Receipt
Full Name of Individual (Last, First, Middle         B. Ford, Milam, , ,         Mailing Address 226 West Woodstone Court         City         Baton Rouge         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         LHSIC         Receipt For: 2022         X         Primary         General         Other (specify) ▼	rt State LA C Occ Con	Drganization Name Zip Code 70808 Cupation (for Individual) mmercial Pharmacy Year-to-Date ▼ 209,20	Date of Receipt 05 31 2021 Transaction ID : SA11AL7661 Amount of Each Receipt this Period 20.84 Memo Item PR Ded
Full Name of Individual (Last, First, Middle         C. Ford, Milam, , ,         Mailing Address 226 West Woodstone Cou         City         Baton Rouge         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         LHSIC         Receipt For: 2022         Y         Primary         General         Other (specify)	rt LA C Occ Con	Drganization Name Zip Code 70808 upation (for Individual) nmercial Pharmacy Year-to-Date ▼ 230.04	Date of Receipt 06 / 15 / 2021 Transaction ID : SA11AI.7705 Amount of Each Receipt this Period 20.84 Memo Item PR Ded
SUBTOTAL of Receipts This Page (optional)			83.35

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FOR LINE NUMBER:

PAGE 12 OF

34

ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	K       11a       11b       11c       12         13       14       15       16       17
or for commercia	al purposes, other than using the	tatements ma name and a	y not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	DMMITTEE (In Full) a Health Service & Inde	emnity Co	mpany DBA Blue Cros	ss & Blue Shield of Louisiana PAC
Full Name of Ford, Milan	Individual (Last, First, Middle Ini n, , ,	tial) or Full O	ganization Name	Date of Receipt
Mailing Address 226 West Woodstone Court				06 / Y Y Y Y Y 2021
City Baton Rouge		State LA	Zip Code 70808	Transaction ID : SA11AI.7749           Amount of Each Receipt this Period
FEC ID numb federal politica	per of contributing al committee.	С		20.84
LHSIC	bloyer (for Individual)		ipation (for Individual) mercial Pharmacy	PR Ded
Receipt For: Primary Other (s		Aggregate	Year-to-Date ▼ 250.88	]
B. Harvey, K	Individual (Last, First, Middle Ini orey, , , PS PO Box 82877	tial) or Full O	ganization Name	Date of Receipt
	00 PO B0x 62677	State	Zin Codo	05 31 2021
City Baton Rouge		State LA	Zip Code 70884	Transaction ID : SA11AI.7696 Amount of Each Receipt this Period
FEC ID numb federal politica	per of contributing al committee.	С		20.84
LHSIC	oloyer (for Individual)		ipation (for Individual) al General	PR Ded
Receipt For: Primary Other (s		Aggregate	Year-to-Date ▼ , 208.40	]
Full Name of <b>C.</b> Harvey, <b>F</b>	Individual (Last, First, Middle Ini Korey, , ,	tial) or Full O	ganization Name	Date of Receipt
	SS PO Box 82877	01-1-	The Octo	06 / D D / Y Y Y Y 2021
City Baton Rouge		State LA	Zip Code 70884	Transaction ID : SA11AI.7740 Amount of Each Receipt this Period
FEC ID numb federal politica	per of contributing al committee.	С		20.84
LHSIC	oloyer (for Individual)		pation (for Individual) I General	PR Ded
Receipt For:	General	Aggregate	Year-to-Date ▼ 229.24	]
SUBTOTAL of	Receipts This Page (optional)		•••••	62.52

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

FOR LINE NUMBER:

PAGE 13 OF

34

ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	(check only one)
	y information copied from such Reports and Sta for commercial purposes, other than using the r			person for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Louisiana Health Service & Inder	nnity Co	ompany DBA Blue Cro	oss & Blue Shield of Louisiana PAC
A.	Mailing Address PO Box 82877			Date of Receipt
	City Baton Rouge	State LA	Zip Code 70884	Transaction ID : SA11AI.7786 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual)		upation (for Individual)	Memo Item
	LHSIC	Lega	al General	PR Ded
	Receipt For: 2022	Aggregate	Year-to-Date ▼ 250.08	
_	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name	Date of Descipt
в.	Keller, Brian, , , Mailing Address 1068 Cyril Ave.	Date of Receipt 03 15 2021		
	City	State	Zip Code	Transaction ID : SA11AI.7444
	Baton Rouge	LA	70806	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) LHSIC		upation (for Individual) P & Chief Marketing Officer	PR Ded
	Receipt For: 2022 ✓ Primary General Other (specify) ▼			
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Keller, Brian, , ,	l) or Full O	rganization Name	Date of Receipt
	Mailing Address 1068 Cyril Ave.	1		03 / D D / Y Y Y Y 2021
	City Baton Rouge	State LA	Zip Code 70806	Transaction ID : SA11AI.7483
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) LHSIC		upation (for Individual) & Chief Marketing Officer	PR Ded
	Receipt For:       2022         Y       Primary       General         Other (specify)       Other	Aggregate		
s	UBTOTAL of Receipts This Page (optional)			104.18
т	OTAL This Period (last page this line number or	ıly)		

FEC Schedule A (Form 3X) Rev. 06/2016

FOR LINE NUMBER:

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34

IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Louisiana Health Service & Inde	mnity Co	mpany DBA Blue Cros	ss & Blue Shield of Louisiana PAC
Α.		al) or Full Or	rganization Name	Date of Receipt
	Mailing Address 1068 Cyril Ave.	04 / D D / Y Y Y Y Y 2021		
	City Baton Rouge	State LA	Zip Code 70806	Transaction ID : SA11AI.7530 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		41.67
	Name of Employer (for Individual) LHSIC		pation (for Individual) & Chief Marketing Officer	PR Ded
	Receipt For: 2022	Aggregate	Year-to-Date ▼ 291.69	]
B R	Full Name of Individual (Last, First, Middle Initia Keller, Brian, , ,	al) or Full Or	ganization Name	Date of Receipt
	Mailing Address 1068 Cyril Ave.	04 30 2021		
	City Baton Rouge	State LA	Zip Code 70806	Transaction ID : SA11AI.7574 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) LHSIC		upation (for Individual) 2 & Chief Marketing Officer	PR Ded
	Receipt For: 2022 ✓ Primary General Other (specify) ▼	]		
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Keller, Brian, , ,	al) or Full Or	ganization Name	Date of Receipt
	Mailing Address 1068 Cyril Ave.			05 15 2021
	City Baton Rouge	State LA	Zip Code 70806	Transaction ID : SA11AI.7619 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) LHSIC		pation (for Individual) & Chief Marketing Officer	PR Ded
	Receipt For: 2022       Image: Primary intermediate	Aggregate	Year-to-Date ▼ 375.03	]
s	UBTOTAL of Receipts This Page (optional)			125.01
Т	OTAL This Period (last page this line number o	nly)		

FEC Schedule A (Form 3X) Rev. 06/2016

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FOR LINE NUMBER:

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34

ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	(check only one)       ▼       11a       11b       11c       12       13       14       15       16       17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full) Louisiana Health Service & Inder	nnity Co	mpany DBA Blue Cros	ss & Blue Shield of Louisiana PAC
Α.	Full Name of Individual (Last, First, Middle Initia Keller, Brian, , , Mailing Address 1068 Cyril Ave.	l) or Full Or	ganization Name	Date of Receipt
	City	State	Zip Code	05 31 2021 Transaction ID : SA11AI.7663
	Baton Rouge	LA	70806	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	LHSIC	SVP	& Chief Marketing Officer	PR Ded
	Receipt For: 2022	Aggregate	Year-to-Date ▼	
	✔   Primary   General     Other (specify)   ▼		416.70	
в.	Full Name of Individual (Last, First, Middle Initia Keller, Brian, , ,	l) or Full Or	ganization Name	Date of Receipt
	Mailing Address 1068 Cyril Ave.	06 15 2021		
	City	State	Zip Code	Transaction ID : SA11AI.7707
	Baton Rouge	LA	70806	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) LHSIC		upation (for Individual) & Chief Marketing Officer	PR Ded
	Receipt For: 2022 ✓ Primary General Other (specify) ▼	Aggregate		
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Keller, Brian, , ,	l) or Full Or	rganization Name	Date of Receipt
	Mailing Address 1068 Cyril Ave.	06 30 2021		
	City Baton Rouge	State LA	Zip Code 70806	Transaction ID : SA11AI.7751
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) LHSIC		pation (for Individual) & Chief Marketing Officer	PR Ded
	Receipt For:       2022         Y       Primary       General         Other (specify)       Other	Aggregate	Year-to-Date ▼ 500.04	
	UBTOTAL of Receipts This Page (optional)			125.01

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X)		)	Use separate schedule(s)	-	FOR LINE NUMBER: PAGE 16 OF 34 (check only one)		
ITEMIZED	RECEIPTS		for each category of the	(check (	· · ·	11c 12	
			Detailed Summary Page	13		15 16 17	
	on copied from such Reports and						
· · · · · · · · · · · · · · · · · · ·	cial purposes, other than using	the name and a	ddress of any political committe	e to solicit	contributions fro	om such committee.	
	COMMITTEE (In Full) na Health Service & In	demnity Co	ompany DBA Blue Cro	nee & Rli	ie Shield o	f Louisiana PAC	
	of Individual (Last, First, Middle	Initial) or Full C	rganization Name	Dete	of Dessint		
A. Kozik, Sue, , , Mailing Address 19434 Cape Hart Ct.					e of Receipt		
mannig / ac						2021	
City		State	Zip Code	Tra	ansaction ID : S	A11AI.7470	
Baton Rou	ge	LA	70809	Amo	unt of Each Re	ceipt this Period	
	mber of contributing tical committee.	С				50.00	
Name of E	mployer (for Individual)	Occ	upation (for Individual)	- D	Memo Item		
LHSIC	, , , , , , , , , , , , , , , , , , ,		EC- INFO TECHNOLOGY	PR De	ed		
Receipt Fo	r: 2022	Aggregate	Year-to-Date ▼				
x Prima							
Other	r (specify) ▼		250.00	-			
Full Name <b>B. Kozik, S</b>	of Individual (Last, First, Middle	Initial) or Full C	rganization Name	Date	of Receipt		
	Mailing Address 19434 Cape Hart Ct.					/ Y Y Y Y Y	
<u></u>					3 31	2021	
City Baton Roug	<b>n</b> e	State LA	Zip Code 70809		insaction ID : S		
	-		70003	Amo	unt of Each Re	ceipt this Period	
	mber of contributing tical committee.	C				50.00	
Name of E LHSIC	mployer (for Individual)		upation (for Individual) EC- INFO TECHNOLOGY	PR De	Memo Item ed		
Receipt Fo	r: 2022	Aggregate	Year-to-Date V				
× Prima							
Other	r (specify) 🔻		300.00				
Full Name C. Kozik, S	of Individual (Last, First, Middle	Initial) or Full C	rganization Name	Deta	of Receipt		
	dress 19434 Cape Hart Ct.				· · ·		
	To				4 15	2021	
City		State	Zip Code	Tra	ansaction ID : S	A11AI.7561	
Baton Rou	ge	LA	70809	Amo	unt of Each Re	ceipt this Period	
	mber of contributing tical committee.	С				50.00	
Name of E LHSIC	mployer (for Individual)		upation (for Individual) C- INFO TECHNOLOGY	PR D	Memo Item ed		
Receipt Fo	r: 2022	Aggregate	Year-to-Date V				
× Prima							
Other	r (specify)		350.00				
SUBTOTAL	of Receipts This Page (optional)					150.00	
				- 2		, , , , , , , , , , , , , , , , , , , ,	

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

FOR LINE NUMBER:

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34

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the			berson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Louisiana Health Service & Ind	demnity Co	ompany DBA Blue Cro	ess & Blue Shield of Louisiana PAC
Full Name of Individual (Last, First, Middle I A. Kozik, Sue, , ,	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 19434 Cape Hart Ct.			04 30 2021
City Baton Rouge	State LA	Zip Code 70809	Transaction ID : SA11AI.7605 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual) LHSIC		upation (for Individual) EC- INFO TECHNOLOGY	PR Ded
Receipt For: 2022	Aggregate	Year-to-Date ▼ 400.00	]
B. Kozik, Sue, , , Mailing Address 19434 Cape Hart Ct.	nitial) or Full O	rganization Name	Date of Receipt
· · · · · · · · · · · · · · · · · · ·	Otata	Zin Onde	05 15 2021
City Baton Rouge	State LA	Zip Code 70809	Transaction ID : SA11AI.7650 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual) LHSIC		upation (for Individual) EC- INFO TECHNOLOGY	PR Ded
Receipt For: 2022 → Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00	]
Full Name of Individual (Last, First, Middle I Kozik, Sue, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kozik, Sue, , ,		
Mailing Address 19434 Cape Hart Ct.			05 / <sup>D</sup> - D / <sup>Y</sup> - Y - Y - Y 2021
City Baton Rouge	State LA	Zip Code 70809	Transaction ID : SA11AI.7694 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual) LHSIC	Occupation (for Individual) EXEC- INFO TECHNOLOGY		PR Ded
Receipt For: 2022 Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	]
SUBTOTAL of Receipts This Page (optional)			150.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

1.

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 OF 34		
IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)		
	isternation and the seat of the			13         14         15         16         17		
	ny information copied from such Reports and Sta for commercial purposes, other than using the					
	NAME OF COMMITTEE (In Full)					
	Louisiana Health Service & Inde	mnity Co	ompany DBA Blue Cros	ss & Blue Shield of Louisiana PAC		
Α.	Full Name of Individual (Last, First, Middle Initia Kozik, Sue, , ,	al) or Full O	rganization Name	Date of Receipt		
	Mailing Address 19434 Cape Hart Ct.			06 / Y Y Y Y 2021		
	City	State	Zip Code	Transaction ID : SA11AI.7738		
	Baton Rouge	LA	70809	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		50.00		
	Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo Item		
	LHSIC	EXE	C- INFO TECHNOLOGY	PR Ded		
	Receipt For: 2022	Aggregate	Year-to-Date ▼			
	Primary     General		550.00	1		
	Other (specify) ▼		550.00			
B.	Full Name of Individual (Last, First, Middle Initiation Kozik, Sue, , ,	al) or Full O	rganization Name	Date of Receipt		
	Mailing Address 19434 Cape Hart Ct.	06 30 2021				
	City	State	Zip Code	Transaction ID : SA11AI.7784		
	Baton Rouge	LA	70809	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		50.00		
	Name of Employer (for Individual) LHSIC		upation (for Individual) EC- INFO TECHNOLOGY	PR Ded		
	Receipt For: 2022	Aggregate	Year-to-Date V			
	× Primary General	, iggi eguie		1		
	Other (specify)	L	600.00			
с.	Full Name of Individual (Last, First, Middle Initia Langlois, Darrell, , ,	al) or Full O	rganization Name	Date of Receipt		
	Mailing Address 42037 Bang Ficklin Road			03 15 2021		
	City	State	Zip Code	Transaction ID : SA11AI.7446		
	Prairieville	LA	70769	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		42.00		
	Name of Employer (for Individual) LHSIC		upation (for Individual) ness Dev & Strategy	PR Ded		
	Receipt For: 2022	Aggregate	Year-to-Date ▼			
	Primary     General			1		
	Other (specify)		210.00	1		
s	UBTOTAL of Receipts This Page (optional)			142.00		

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

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 19 OF 34		
	PTS	for each category of the Detailed Summary Page	(check only one)           ✗         11a         11b         11c         12           13         14         15         16         17		
			erson for the purpose of soliciting contributions to solicit contributions from such committee.		
NAME OF COMMITTEE	. ,	Company DBA Blue Cros	ss & Blue Shield of Louisiana PAC		
A. Langlois, Darrell, , ,	(Last, First, Middle Initial) or Full	Organization Name	Date of Receipt		
Mailing Address 42037 Bang Ficklin Road			03 / D D / Y Y Y Y 03 31 2021		
City Prairieville	State LA	Zip Code 70769	Transaction ID : SA11AI.7485 Amount of Each Receipt this Period		
FEC ID number of contr federal political committe	Ű,		42.00		
Name of Employer (for	,	ccupation (for Individual)	Memo Item		
LHSIC Receipt For: 2022		usiness Dev & Strategy	PR Ded		
	General Aggrega	te Year-to-Date ▼ 252.00			
Full Name of Individual B. Langlois, Darrell, ,	(Last, First, Middle Initial) or Full	Organization Name	Data of Receipt		
Mailing Address 42037		Date of Receipt			
City	State	Zip Code	04 15 2021 Transaction ID : SA11AI.7532		
Prairieville	LA	70769	Amount of Each Receipt this Period		
FEC ID number of contr federal political committe	Ű,		42.00		
Name of Employer (for LHSIC	,	ccupation (for Individual) Business Dev & Strategy	PR Ded		
Receipt For: 2022 Primary Other (specify) ▼	General Aggrega	te Year-to-Date ▼ 294.00			
Full Name of Individual <b>C.</b> Langlois, Darrell,	(Last, First, Middle Initial) or Full	Organization Name	Date of Receipt		
Mailing Address 42037	Bang Ficklin Road		04 30 2021		
City Prairieville	State LA	Zip Code 70769	Transaction ID : SA11AI.7576 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		42.00		
		ccupation (for Individual) usiness Dev & Strategy	PR Ded		
Receipt For:       2022         X       Primary         Other       (specify)	General Aggrega	te Year-to-Date ▼ 336.00			
SUBTOTAL of Receipts T	his Page (optional)	•••••	126.00		

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

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FOR LINE NUMBER:

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34

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Louisiana Health Service & Ind	demnity Co	ompany DBA Blue Cro	ss & Blue Shield of Louisiana PAC
✓       Full Name of Individual (Last, First, Middle         A.       Langlois, Darrell, , ,         Mailing Address 42037 Bang Ficklin Road         City         Prairieville         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         LHSIC         Receipt For: 2022         ▼         Primary         General         Other (specify) ▼	State LA C Occ Bus	Zip Code         70769         supation (for Individual)         siness Dev & Strategy         Year-to-Date ▼         378.00	Date of Receipt
Full Name of Individual (Last, First, Middle         B.       Langlois, Darrell, , ,         Mailing Address 42037 Bang Ficklin Road         City         Prairieville         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         LHSIC         Receipt For: 2022         Y       Primary         General         Other (specify)	State LA C Occ Bus	Zip Code         70769         supation (for Individual)         siness Dev & Strategy         Year-to-Date ▼         420.00	Date of Receipt 05 31 2021 Transaction ID : SA11AL7665 Amount of Each Receipt this Period 42.00 Memo Item PR Ded
Full Name of Individual (Last, First, Middle         C.       Langlois, Darrell, , ,         Mailing Address 42037 Bang Ficklin Road         City         Prairieville         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         LHSIC         Receipt For: 2022         X       Primary         General         Other (specify)	State LA C Occ Bus	Drganization Name Zip Code 70769 upation (for Individual) iness Dev & Strategy Year-to-Date ▼ 462.00	Date of Receipt 06 / 15 / 2021 Transaction ID : SA11AI.7709 Amount of Each Receipt this Period 42.00 Memo Item PR Ded
SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line number			126.00

FEC Schedule A (Form 3X) Rev. 06/2016

FOR LINE NUMBER:

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34

ITEMIZED RECEIPTS			f	or each category of the Detailed Summary Page	l `_	eck only one) 11a 11b 11c 12 13 14 15 16 17		
	y information copied from such Reports and Sta for commercial purposes, other than using the					for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) Louisiana Health Service & Inde	mnity Co	om	pany DBA Blue Cros	s &	Blue Shield of Louisiana PAC		
Α.	Full Name of Individual (Last, First, Middle Initia Langlois, Darrell, , , Mailing Address 42037 Bang Ficklin Road	al) or Full O	rgar	nization Name Zip Code		Date of Receipt 06 / 30 / 2021 Transaction ID : SA11AI.7753		
	Prairieville	LA		70769		Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С				42.00		
	Name of Employer (for Individual)		•	ion (for Individual)		Memo Item		
	LHSIC	Bus	sines	s Dev & Strategy	F	PR Ded		
	Receipt For: 2022	Aggregate	Yea	r-to-Date ▼ 504.00				
_	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rgar	nization Name				
в.	Mayo, Tamara, , , Mailing Address 3235 Grand Way Avenue					Date of Receipt		
	City	State				Transaction ID : SA11AI.7600		
	Baton Rouge	LA	_	70810	_	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	FEC ID number of contributing federal political committee.				20.84		
	Name of Employer (for Individual) LHSIC		cupation (for Individual) - Provider Reimb & Audit			Memo Item PR Ded		
	Receipt For: 2022       Aggregate Year-to-Date ▼         Y       Primary       General         Other (specify) ▼       208.40							
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Mayo, Tamara, , ,	al) or Full O	rgar	nization Name		Date of Receipt		
	Mailing Address 3235 Grand Way Avenue					05 / D d / Y Y Y Y 2021		
	City Baton Rouge	State LA		Zip Code 70810		Transaction ID : SA11AI.7644		
	FEC ID number of contributing federal political committee.	С				Amount of Each Receipt this Period		
	Name of Employer (for Individual) LHSIC		ccupation (for Individual) P - Provider Reimb & Audit			Memo Item PR Ded		
	Receipt For: 2022 Primary General Other (specify)	al Aggregate Year-to-Date ▼ 229.24						
⊢	UBTOTAL of Receipts This Page (optional)					83.68		
11	<b>OTAL</b> This Period (last page this line number o	nıy)		••••••				

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 22 OF 34	
IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)	
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) Louisiana Health Service & Inde	mnity Co	ompany DBA Blue Cro	ss & Blue Shield of Louisiana PAC	
<u>к</u>	· · · · · · · · · · · · · · · · · · ·	ial) or Full C	Organization Name	Date of Receipt	
	Mailing Address 3235 Grand Way Avenue	- 1		05 15 / Y Y Y Y 2021	
	City Baton Rouge	State LA	Zip Code 70810	Transaction ID : SA11AI.7645 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		20.84	
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item	
	LHSIC	VP	- Provider Reimb & Audit	PR Ded	
	Receipt For: 2022 ✓ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.08	1	
				1	
в.	Full Name of Individual (Last, First, Middle Initi Mayo, Tamara, , ,	ial) or Full C	organization Name	Date of Receipt	
	Mailing Address 3235 Grand Way Avenue			M M / D D / Y Y Y Y 05 31 2021	
	City	State LA	Zip Code	Transaction ID : SA11AI.7688	
	Baton Rouge		70810	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		20.84	
	Name of Employer (for Individual) LHSIC		upation (for Individual) - Provider Reimb & Audit	PR Ded	
	Receipt For: 2022	Aggregate	Year-to-Date ▼		
	✔   Primary   General     Other (specify)   ▼		270.92		
	Full Name of Individual (Last, First, Middle Initi Mayo, Tamara, , ,	ial) or Full C	Organization Name	Date of Receipt	
0.	Mailing Address 3235 Grand Way Avenue			05 31 2021	
	City Dates Davisa	State LA	Zip Code	Transaction ID : SA11AI.7689	
	Baton Rouge		70810	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.			20.84	
	Name of Employer (for Individual) LHSIC		upation (for Individual) - Provider Reimb & Audit	PR Ded	
	Receipt For: 2022           Y         Primary         General           Other (specify)         Other (specify)	Aggregate	Year-to-Date ▼ 291.76		
s	UBTOTAL of Receipts This Page (optional)			62.52	

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

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)           X         11a         11b         11c         12           13         14         15         16         17
Any information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Louisiana Health Service & Inde	emnity Co	ompany DBA Blue Cros	ss & Blue Shield of Louisiana PAC
Full Name of Individual (Last, First, Middle Ini A. Mayo, Tamara, , ,	itial) or Full C	Organization Name	Date of Receipt
Mailing Address 3235 Grand Way Avenue			06 15 2021
City Baton Rouge	State LA	Zip Code 70810	Transaction ID : SA11AI.7732 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.84
Name of Employer (for Individual) LHSIC		upation (for Individual) - Provider Reimb & Audit	PR Ded
Receipt For: 2022	Aggregate	Year-to-Date ▼ 312.60	]
Full Name of Individual (Last, First, Middle In Mayo, Tamara, , , Mailing Address 3235 Grand Way Avenue	itial) or Full C	Organization Name	Date of Receipt
	Ctoto	Zin Codo	06 15 2021
City Baton Rouge	State LA	Zip Code 70810	Transaction ID : SA11AI.7733           Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		20.84
Name of Employer (for Individual) LHSIC		upation (for Individual) - Provider Reimb & Audit	PR Ded
Receipt For: 2022	Aggregate	Year-to-Date ▼ , 333.44	]
Full Name of Individual (Last, First, Middle In Mayo, Tamara, , ,	itial) or Full C	Organization Name	Date of Receipt
Mailing Address 3235 Grand Way Avenue			06 / 06 / Y Y Y Y Y 06 30 / 2021
City Baton Rouge	State LA	Zip Code 70810	Transaction ID : SA11AI.7778 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		20.84
LHSIC		upation (for Individual) - Provider Reimb & Audit	PR Ded
Receipt For: 2022 Primary General Other (specify)	Aggregate	Year-to-Date ▼ 354.28	]
SUBTOTAL of Receipts This Page (optional)		•	62.52

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

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34

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)
			13     14     15     16     17       person for the purpose of soliciting contributions       be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
	ndemnity Co	ompany DBA Blue Cro	oss & Blue Shield of Louisiana PAC
Full Name of Individual (Last, First, Middle A. Mayo, Tamara, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 3235 Grand Way Avenue			06 / D D / Y Y Y Y 2021
City Baton Rouge	State LA	Zip Code 70810	Transaction ID : SA11AI.7779           Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.84
Name of Employer (for Individual) LHSIC		upation (for Individual) · Provider Reimb & Audit	PR Ded
Receipt For: 2022 X Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.12	]
Full Name of Individual (Last, First, Middle B. Michelli, Geoff, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 10457 Barry Dr.			06 / D D / Y Y Y Y 06 15 2021
City Baton Rouge	State LA	Zip Code 70809	Transaction ID : SA11AI.7724 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer (for Individual) LHSIC		upation (for Individual) urity Architecture	PR Ded
Receipt For: 2022 Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 220.00	]
Full Name of Individual (Last, First, Middle C. Michelli, Geoff, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 10457 Barry Dr.			06 / D D / Y Y Y Y 2021
City Baton Rouge	State LA	Zip Code 70809	Transaction ID : SA11AI.7769 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		
Name of Employer (for Individual) LHSIC		upation (for Individual) urity Architecture	PR Ded
Receipt For: 2022 Primary General Other (specify)	Aggregate	Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (optional	)		60.84

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

FEC Schedule A (Form 3X) Rev. 06/2016

1.

FOR LINE NUMBER:

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34

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)         X       11a         11b       11c         12         13       14         15       16         17
Any information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Louisiana Health Service & Ind	emnity Co	ompany DBA Blue Cro	ss & Blue Shield of Louisiana PAC
Full Name of Individual (Last, First, Middle In A. Mix, Becca, , ,	itial) or Full O	rganization Name	Date of Receipt
Mailing Address 3027 Grand Route St. John S	St.		05 15 2021
City New Orleans	State LA	Zip Code 70119	Transaction ID : SA11AI.7653 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer (for Individual) LHSIC		upation (for Individual) al - Operations	PR Ded
Receipt For: 2022	Aggregate	Year-to-Date ▼ 225.00	]
Full Name of Individual (Last, First, Middle In         B.       Mix, Becca, , ,         Mailing Address 3027 Grand Route St. John S	,	rganization Name	Date of Receipt
City	State	Zip Code	05 31 2021 Transaction ID : SA11AI.7697
New Orleans	LA	70119	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer (for Individual) LHSIC		upation (for Individual) al - Operations	Memo Item PR Ded
Receipt For: 2022	Aggregate	Year-to-Date ▼ 250.00	]
Full Name of Individual (Last, First, Middle In C. Mix, Becca, , ,	itial) or Full O	rganization Name	Date of Receipt
Mailing Address 3027 Grand Route St. John S	St.		06 / Y Y Y Y 06 15 2021
City New Orleans	State LA	Zip Code 70119	Transaction ID : SA11AI.7741 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer (for Individual) LHSIC		upation (for Individual) al - Operations	PR Ded
Receipt For: 2022 Primary General Other (specify)	Aggregate	Year-to-Date ▼ 275.00	]
SUBTOTAL of Receipts This Page (optional)			75.00

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

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SCHEDULE A (FEC Form 3)		Schodulo(c) FOR LINE NUMBER: PAGE 26 OF 34	
ITEMIZED RECEIPTS	Use separate for each categ Detailed Summ	gory of the	
		used by any person for the purpose of soliciting contributions litical committee to solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) Louisiana Health Service & I	ndemnity Company DBA	A Blue Cross & Blue Shield of Louisiana PAC	
Full Name of Individual (Last, First, Middle Mix, Becca, , , Mailing Address 3027 Grand Route St. Jol		Date of Receipt	
	-	06 / 06 / Y Y Y Y	
City New Orleans	State Zip Code LA 70119	Transaction ID : SA11AI.7787 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	25.00	
Name of Employer (for Individual)	Occupation (for Individ	dual) Memo Item	
LHSIC	Legal - Operations	PR Ded	
Receipt For: 2022	Aggregate Year-to-Date ▼	300.00	
Full Name of Individual (Last, First, Middle B. Richert, Thomas, , ,		Date of Receipt	
Mailing Address 4701 Transcontinental Dri	03 15 2021		
City	State Zip Code	Transaction ID : SA11AI.7465	
Metairie FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 42.00	
Name of Employer (for Individual) LHSIC	Occupation (for Individual Business to Consume	<i>,</i>	
Receipt For: 2022	Aggregate Year-to-Date ▼	210.00	
Full Name of Individual (Last, First, Middle C. Richert, Thomas, , ,	Initial) or Full Organization Name	Date of Receipt	
Mailing Address 4701 Transcontinental Dr	Mailing Address 4701 Transcontinental Drive		
City Metairie	StateZip CodeLA70006	Transaction ID : SA11AI.7508           Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	42.00	
Name of Employer (for Individual) LHSIC	Occupation (for Individ Business to Consume		
Receipt For: 2022 Primary General Other (specify)	Aggregate Year-to-Date ▼	252.00	
SUBTOTAL of Receipts This Page (optiona	)	109.00	

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

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and Statem or for commercial purposes, other than using the name		son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Louisiana Health Service & Indemn	ity Company DBA Blue Cross	s & Blue Shield of Louisiana PAC
Metairie     L       FEC ID number of contributing federal political committee.     C       Name of Employer (for Individual) LHSIC     C	tate Zip Code A 70006	Date of Receipt 04 / 15 / 2021 Transaction ID : SA11AI.7553 Amount of Each Receipt this Period 42.00 Memo Item PR Ded
✔     Primary     General       Other (specify)     ▼	gregate Year-to-Date ▼ 294.00	
Metairie L FEC ID number of contributing federal political committee. C Name of Employer (for Individual) LHSIC	tate Zip Code _A 70006	Date of Receipt 04 30 2021 Transaction ID : SA11AI.7597 Amount of Each Receipt this Period 42.00 Memo Item PR Ded
Metairie L FEC ID number of contributing federal political committee. C Name of Employer (for Individual) LHSIC	tate Zip Code _A 70006	Date of Receipt
SUBTOTAL of Receipts This Page (optional)	<b>r</b>	126.00

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 28 OF 34	
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)         ▲         11a       11b         11b       11c         12         13       14         15       16	
	y information copied from such Reports and S for commercial purposes, other than using the			person for the purpose of soliciting contributions e to solicit contributions from such committee.	
$\left\rangle$	NAME OF COMMITTEE (In Full)			ss & Blue Shield of Louisiana PAC	
A.	Full Name of Individual (Last, First, Middle Init Richert, Thomas, , ,	tial) or Full C	rganization Name	Date of Receipt	
	Mailing Address 4701 Transcontinental Drive	05 31 2021			
	City Metairie	State LA	Zip Code 70006	Transaction ID : SA11AI.7686 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		42.00	
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item	
	LHSIC Receipt For: 2022		iness to Consumer Year-to-Date ▼	PR Ded	
	✔   Primary   General     Other (specify)   ▼		420.00	]	
В.	Full Name of Individual (Last, First, Middle Init Richert, Thomas, , ,	tial) or Full C	rganization Name	Date of Receipt	
	Mailing Address 4701 Transcontinental Drive			06 15 2021	
	City	State	Zip Code	Transaction ID : SA11AI.7730	
	Metairie FEC ID number of contributing federal political committee.	C	70006	Amount of Each Receipt this Period 42.00	
	Name of Employer (for Individual) LHSIC		upation (for Individual) siness to Consumer	PR Ded	
	Receipt For: 2022	Aggregate	Year-to-Date ▼		
	✔   Primary   General     Other (specify)   ▼		462.00	]	
_	Full Name of Individual (Last, First, Middle Init Shepherd, Paula, , ,	tial) or Full C	rganization Name	Date of Receipt	
	Mailing Address 2247 Midway Road	05 31 2021			
	City Slaughter	State LA	Zip Code 70777	Transaction ID : SA11AI.7668 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) VP - Ben Admin Claims Ops		20.84	
	Name of Employer (for Individual) LHSIC			PR Ded	
	Receipt For:       2022         X       Primary       General         Other (specify)       Other (specify)	Aggregate	Year-to-Date ▼ 208.40	]	

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

SCHEDULE A (FEC Form 3X)	Use separate sche		
ITEMIZED RECEIPTS	for each category o Detailed Summary	of the	
		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) Louisiana Health Service & Inc	lemnity Company DBA Bl	ue Cross & Blue Shield of Louisiana PAC	
Full Name of Individual (Last, First, Middle I A. Shepherd, Paula, , ,	nitial) or Full Organization Name	Date of Receipt	
Mailing Address 2247 Midway Road	State Zip Code	06 15 2021 Transaction ID : SA11AI.7712	
Slaughter	LA 70777	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	20.84	
Name of Employer (for Individual) LHSIC	Occupation (for Individual) VP - Ben Admin Claims Op		
Receipt For: 2022 ✓ Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	29.24	
Full Name of Individual (Last, First, Middle I Simon, Lawrence, , ,	nitial) or Full Organization Name	Date of Receipt	
Mailing Address 106 Rimwood Avenue	Mailing Address 106 Rimwood Avenue		
City Lafayette	State Zip Code LA 70501	Transaction ID : SA11AI.7691 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	20.84	
Name of Employer (for Individual) LHSIC	Occupation (for Individual) Lead Medical Director	PR Ded	
Receipt For: 2022	Aggregate Year-to-Date ▼	208.40	
Full Name of Individual (Last, First, Middle I C. Simon, Lawrence, , ,	nitial) or Full Organization Name	Date of Receipt	
Mailing Address 106 Rimwood Avenue		06 / Y Y Y Y 2021	
City Lafayette	StateZip CodeLA70501	Transaction ID : SA11AI.7735           Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	20.84	
Name of Employer (for Individual) LHSIC	Occupation (for Individual) Lead Medical Director	PR Ded	
Receipt For: 2022 Primary General Other (specify)	Aggregate Year-to-Date ▼	29.24	
SUBTOTAL of Receipts This Page (optional)	·		
TOTAL This Period (last page this line numbe	r only)		

#### Image# 202107069450982610

#### SCHEDULE A (FEC Form 3X) ľ

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Louisiana Health Service & Inc	lemnity Co	ompany DBA Blue Cro	ss & Blue Shield of Louisiana PAC
Full Name of Individual (Last, First, Middle I         Simon, Lawrence, , ,         Mailing Address 106 Rimwood Avenue         City	State	Zip Code	Date of Receipt
Lafayette FEC ID number of contributing federal political committee. Name of Employer (for Individual) LHSIC		20501 upation (for Individual) d Medical Director	Amount of Each Receipt this Period 20.84 Memo Item PR Ded
Receipt For: 2022		Year-to-Date  250.08 250.08	]
B. Udvarhelyi, I Steven, , , Mailing Address 7623 Boyce Drive			
City     State       Baton Rouge     LA       FEC ID number of contributing federal political committee.     C       Name of Employer (for Individual)		Zip Code 70809	Transaction ID : SA11AI.7507         Amount of Each Receipt this Period         208.33         Memo Item
LHSIC Receipt For: 2022 Primary General Other (specify) ▼	1	O Administration Year-to-Date ▼ 208.33	PR Ded
Full Name of Individual (Last, First, Middle I Udvarhelyi, I Steven, , , Mailing Address 7623 Boyce Drive	nitial) or Full C	Organization Name	Date of Receipt
City Baton Rouge	State LA	Zip Code 70809	Transaction ID : SA11AI.7552 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		208.33
Name of Employer (for Individual) LHSIC Receipt For: 2022 Primary General Other (specify)	CEC	upation (for Individual) D Administration Year-to-Date ▼ 416.66	PR Ded
SUBTOTAL of Receipts This Page (optional)		<u> </u>	437.50

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X     11a     11b     11c     12       13     14     15     16     17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	ay not be sold or used by any p address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Louisiana Health Service & Ind	demnity Co	ompany DBA Blue Cro	ss & Blue Shield of Louisiana PAC
Full Name of Individual (Last, First, Middle I         A.       Udvarhelyi, I Steven, , ,         Mailing Address 7623 Boyce Drive         City         Baton Rouge         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         LHSIC         Receipt For: 2022         Y       Primary         General         Other (specify) ▼	State LA C Occ CEC	Zip Code 70809 upation (for Individual) O Administration Year-to-Date ▼ 624.99	Date of Receipt 04 30 2021 Transaction ID : SA11AI.7596 Amount of Each Receipt this Period 208.33 Memo Item PR Ded
Full Name of Individual (Last, First, Middle I         Udvarhelyi, I Steven, , ,         Mailing Address 7623 Boyce Drive         City         Baton Rouge         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         LHSIC         Receipt For: 2022         Y         Primary         General         Other (specify) ▼	State LA C Occ CEC	Drganization Name         Zip Code         70809         upation (for Individual)         O Administration         Year-to-Date ▼         833.32	Date of Receipt 05 / 15 / 2021 Transaction ID : SA11AL.7641 Amount of Each Receipt this Period 208.33 Memo Item PR Ded
Full Name of Individual (Last, First, Middle I         C.       Udvarhelyi, I Steven, , ,         Mailing Address 7623 Boyce Drive         City         Baton Rouge         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         LHSIC         Receipt For: 2022         X         Primary         General         Other (specify)	C C C C C C C C C C C	Zip Code 70809 upation (for Individual) D Administration Year-to-Date ▼ 1041.65	Date of Receipt 05 / 31 / 2021 Transaction ID : SA11AI.7685 Amount of Each Receipt this Period 208.33 Memo Item PR Ded
SUBTOTAL of Receipts This Page (optional)			624.99

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X       11a       11b       11c       12         13       14       15       16       17
Any information copied from such Reports and or for commercial purposes, other than using t	Statements ma	ay not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Louisiana Health Service & Ind	demnity Co	ompany DBA Blue Cros	ss & Blue Shield of Louisiana PAC
Full Name of Individual (Last, First, Middle           A.       Udvarhelyi, I Steven, , ,         Mailing Address 7623 Boyce Drive         City         Baton Rouge         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         LHSIC         Receipt For: 2022            Primary          Other (specify)	State LA C Occu CEC	rganization Name Zip Code 70809 upation (for Individual) D Administration Year-to-Date ▼ 1249.98	Date of Receipt 06 15 2021 Transaction ID : SA11AI.7729 Amount of Each Receipt this Period 208.33 Memo Item PR Ded
Full Name of Individual (Last, First, Middle I         B.       Udvarhelyi, I Steven, , ,         Mailing Address 7623 Boyce Drive         City         Baton Rouge         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         LHSIC         Receipt For: 2022         ✓         Y         Other (specify) ▼	State LA C Occu CEC	rganization Name Zip Code 70809 upation (for Individual) D Administration Year-to-Date ▼ 1458.31	Date of Receipt
Full Name of Individual (Last, First, Middle         Wakefield, Cindy, , ,         Mailing Address 998 Stanford Ave.         City         Baton Rouge         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         LHSIC         Receipt For: 2022         Y         Primary         General         Other (specify)	State LA C Occu VP -	rganization Name Zip Code 70808 upation (for Individual) Corp Comm & Marketing Year-to-Date ▼ 225.00	Date of Receipt 05 / 15 / 2021 Transaction ID : SA11AI.7648 Amount of Each Receipt this Period 25.00 Memo Item PR Ded
SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line number		· · · · · · · · · · · · · · · · · · ·	441.66

#### Image# 202107069450982613

## SCHEDULE A (FEC Form 3X)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)         X         11a         11b         11c         12         13         14         15         16         17	
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full) Louisiana Health Service & In	demnity Co	ompany DBA Blue Cro	ss & Blue Shield of Louisiana PAC	
Full Name of Individual (Last, First, Middle A. Wakefield, Cindy, , , Mailing Address 998 Stanford Ave. City Baton Rouge	Initial) or Full O State LA	Zip Code 70808	Date of Receipt 05 / 31 / 2021 Transaction ID : SA11AI.7692 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. Name of Employer (for Individual) LHSIC Receipt For: 2022	VP	upation (for Individual) - Corp Comm & Marketing Year-to-Date ▼ 250.00	25.00 Memo Item PR Ded	
B. Full Name of Individual (Last, First, Middle Wakefield, Cindy, , , Mailing Address 998 Stanford Ave.	ling Address 998 Stanford Ave.		Date of Receipt 06 / 15 / 2021 Transaction ID : SA11AL7736	
Baton Rouge         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         LHSIC         Receipt For: 2022         ▼         Primary       General         Other (specify) ▼	VP	70808         upation (for Individual)         - Corp Comm & Marketing         Year-to-Date ▼         275.00	Amount of Each Receipt this Period  25.00  Memo Item PR Ded	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         Wakefield, Cindy, , ,         Mailing Address 998 Stanford Ave.         City       State       Zip Code			Date of Receipt 06 / 06 / 2021 Transaction ID : SA11AI.7782	
Baton Rouge FEC ID number of contributing federal political committee.	C	70808	Amount of Each Receipt this Period	
Name of Employer (for Individual) LHSIC Receipt For: 2022 Primary General Other (specify)	VP -	upation (for Individual) Corp Comm & Marketing Year-to-Date ▼ 300.00	PR Ded	
SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line number			75.00	

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE B (FEC Form 3X) FOR LINE NUMBER: PAGE 34 OF 34					
	D DISBURSEMENTS		arate schedule(s) category of the	(check only	one)
			Summary Page	21b 28a	22     ★     23     26     27       28b     28c     29     30b
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.					
Louisiana Health Service & Indemnity Company DBA Blue Cross & Blue Shield of Louisiana PAC					
Full Name (Last, First, Middle Initial) GARRET GRAVES VICTORY FUND					Date of Disbursement
Mailing Address PO BOX 64845					05 10 2021
City BATON I	ROUGE	State LA	tate Zip Code LA 70896		FEC Identification Number
Purpose	of Disbursement ontribution		10000		C C00635565
	Candidate Name			Category/	Transaction ID : SB23.7792 Amount of Each Disbursement this Period
_	GARRET GRAVES VICTORY FUND			Туре	500.00
Office So	bught: <b>x</b> House Disburse Senate <b>x</b> President	ement For: 2 Primary Other (spec	General	al	
State:	LA District: 06		••••		Memo Item
Full Name (Last, First, Middle Initial) B. TROY CARTER FOR CONGRESS Mailing Address PO BOX 50730					Date of Disbursement
					00 2021
City NEW OF	-	State LA	Zip Code 70150		FEC Identification Number
	of Disbursement				C C00763649
Candidat	Category/ TROY CARTER FOR CONGRESS				Transaction ID : SB23.7789 Amount of Each Disbursement this Period
Office So	bught: X House Disburse Senate X	ment For: 2	2022 General	1000.00	
State:	LA District: 02	Other (spec			Memo Item
Full Nam	Full Name (Last, First, Middle Initial)				
C.					Date of Disbursement
Mailing Address					
City		State	Zip Code		FEC Identification Number
Purpose of Disbursement					C
Candidate Name Category/ Type					Amount of Each Disbursement this Period
Office So		Disbursement For:			
State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State: State					Memo Item
State: District:					
SUBTOTAL of Disbursements This Page (optional)					
TOTAL This Period (last page this line number only)					