



**BlueCross BlueShield
of Kansas City**

An Independent Licensee of the
Blue Cross and Blue Shield Association

July 24, 2012

RECEIVED
2012 JUL 27 AM 10:46
FEC MAIL CENTER
One Pershing Square
2301 Main
P.O. Box 419169
Kansas City, MO 64141-6169
Telephone: (816) 395-2222
www.bcbskc.com

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

Re: Blue Cross and Blue Shield of Kansas City
Federal Political Action Committee
FEC No. C00301358
FEC Form 3x – April 1, 2012 to June 30, 2012 Quarterly Report

Dear Sir or Madam:

Enclosed for filing is an original FEC Form 3X – Report of Receipts and Disbursements, submitted on behalf of Blue Cross and Blue Shield of Kansas City Federal Political Action Committee. This report covers committee activity from April 1, 2012 through June 30, 2012. I apologize that this report is being filed later than the July 15 due date, which was the result of an employee resignation.

If you have any questions, please feel free to contact me at (816) 395-2960 or by e-mail at Brenda.johnson2@bluekc.com.

Sincerely,

Brenda Johnson

Brenda Johnson
Government Affairs

Enclosure

Cc: Coni K. Fries, Committee Treasurer

12030862587

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Blue Cross and Blue Shield of Kansas City Federal Political Action Committee

Report Covering the Period: From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	2

 To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	2

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand	Y Y Y Y 2 0 1 2		
January 1,			6,638.99
(b) Cash on Hand at			
Beginning of Reporting Period.....		1,4078.99	
(c) Total Receipts (from Line 19).....		6,800.00	14,800.00
(d) Subtotal (add Lines 6(b) and			
6(c) for Column A and Lines			
6(a) and 6(c) for Column B).....		2,0878.99	21,438.99
<hr/>			
7. Total Disbursements (from Line 31).....		9,420.52	9,980.52
<hr/>			
8. Cash on Hand at Close of			
Reporting Period			
(subtract Line 7 from Line 6(d)).....		1,1458.47	11,458.47
<hr/>			
9. Debts and Obligations Owed TO			
the Committee (Itemize all on			
Schedule C and/or Schedule D).....		0.00	
<hr/>			
10. Debts and Obligations Owed BY			
the Committee (Itemize all on			
Schedule C and/or Schedule D).....		0.00	

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

For further information contact:

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

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

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DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Blue Cross and Blue Shield of Kansas City Federal Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 1 2 To: M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 1 2

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I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6,800.00	1,480.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6,800.00	1,480.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totale to Line 33, page 5).....▶	6,800.00	1,480.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received.....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5).....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	6,800.00	1,480.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6,800.00	1,480.00

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0 .. 0 0	0 .. 0 0
(ii) Non-Federal Share	0 .. 0 0	0 .. 0 0
(b) Other Federal Operating Expenditures	0 .. 0 0	0 .. 0 0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0 .. 0 0	0 .. 0 0
22. Transfers to Affiliated/Other Party Committees	8, 200 0 .. 0 0	8, 700 0 .. 0 0
23. Contributions to Federal Candidates/Committees and Other Political Committees	1, 000 0 .. 0 0	1, 000 0 .. 0 0
24. Independent Expenditures (use Schedule E)	0 .. 0 0	0 .. 0 0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0 .. 0 0	0 .. 0 0
26. Loan Repayments Made	0 .. 0 0	0 .. 0 0
27. Loans Made	0 .. 0 0	0 .. 0 0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0 .. 0 0	0 .. 0 0
(b) Political Party Committees	0 .. 0 0	0 .. 0 0
(c) Other Political Committees (such as PACs)	0 .. 0 0	0 .. 0 0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0 .. 0 0	0 .. 0 0
29. Other Disbursements	2 20 5 2	2 80 5 2
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0 .. 0 0	0 .. 0 0
(ii) "Levin" Share	0 .. 0 0	0 .. 0 0
(b) Federal Election Activity Paid Entirely With Federal Funds	0 .. 0 0	0 .. 0 0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0 .. 0 0	0 .. 0 0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	9, 420 5 2	9, 980 5 2
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	9, 420 5 2	9, 980 5 2

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	6 8 0 0.0 0	1 4 8 0 0.0 0
34. Total Contribution Refunds (from Line 28(d))	0.0 0	0.0 0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6 8 0 0.0 0	1 4 8 0 0.0 0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.0 0	0.0 0
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.0 0	0.0 0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.0 0	0.0 0

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

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

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 4

<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of Kansas City Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Putthoff, Tama		Date of Receipt MM / DD / YYYY 04 / 06 / 2012
Mailing Address 2301 Main		Amount of Each Receipt this Period , 500.00
City Kansas City	State Zip Code MO 64108	
FEC ID number of contributing federal political committee. C 00301358		
Name of Employer BCBSKC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ , 500.00	

Full Name (Last, First, Middle Initial) B. Berry, Jeff		Date of Receipt MM / DD / YYYY 04 / 06 / 2012
Mailing Address 2301 Main		Amount of Each Receipt this Period , 600.00
City Kansas City	State Zip Code MO 64108	
FEC ID number of contributing federal political committee. C 00301358		
Name of Employer BCBSKC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ , 600.00	

Full Name (Last, First, Middle Initial) C. Bibler, Mary		Date of Receipt MM / DD / YYYY 04 / 06 / 2012
Mailing Address 2301 Main		Amount of Each Receipt this Period , 500.00
City Kansas City	State Zip Code MO 64108	
FEC ID number of contributing federal political committee. C 00301358		
Name of Employer BCBSKC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ , 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	, 1,600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 2 OF 4	
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of Kansas City Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Powell, Wayne		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 2
Mailing Address 2301 Main		Amount of Each Receipt this Period , 5 0 0 0 . 0 0
City Kansas City	State Zip Code MO 64108	
FEC ID number of contributing federal political committee. C 0 0 3 0 1 3 5 8		
Name of Employer BCBSKC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ , 5 0 0 0 . 0 0	

Full Name (Last, First, Middle Initial) B. Kastner, Rick		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 2
Mailing Address 2301 Main		Amount of Each Receipt this Period , 1 0 0 0 . 0 0
City Kansas City	State Zip Code MO 64108	
FEC ID number of contributing federal political committee. C 0 0 3 0 1 3 5 8		
Name of Employer BCBSKC	Occupation Group Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ , 1 0 0 0 . 0 0	

Full Name (Last, First, Middle Initial) C. Nightingale, Tom		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 2
Mailing Address 2301 Main		Amount of Each Receipt this Period , 5 0 0 0 . 0 0
City Kansas City	State Zip Code MO 64108	
FEC ID number of contributing federal political committee. C 0 0 3 0 1 3 5 8		
Name of Employer BCBSKC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ , 5 0 0 0 . 0 0	

SUBTOTAL of Receipts This Page (optional).....▶	, 2 0 0 0 . 0 0
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3 OF 4				
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (in Full)
Blue Cross and Blue Shield of Kansas City Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Gentile, David		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 2
Mailing Address 2301 Main		Amount of Each Receipt this Period , 2,000.00
City Kansas City	State Zip Code MO 64108	
FEC ID number of contributing federal political committee. C 00301358		
Name of Employer BCBSKC	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ , 2,000.00	

Full Name (Last, First, Middle Initial) B. Hamerle, Jane		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 1 2
Mailing Address 2301 Main		Amount of Each Receipt this Period , 500.00
City Kansas City	State Zip Code MO 64108	
FEC ID number of contributing federal political committee. C 00301358		
Name of Employer BCBSKC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ , 500.00	

Full Name (Last, First, Middle Initial) C. Taylor, Darren		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 1 2
Mailing Address 2301 Main		Amount of Each Receipt this Period , 200.00
City Kansas City	State Zip Code MO 64108	
FEC ID number of contributing federal political committee. C 00301358		
Name of Employer BCBSKC	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ , 200.00	

SUBTOTAL of Receipts This Page (optional).....▶	, 2,700.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: (check only one)		PAGE 4 OF 4	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of Kansas City Federal Political Action Committee

A. Full Name (Last, First, Middle Initial)
Wilson, John

Mailing Address
2301 Main

City **Kansas City** State **MO** Zip Code **64108**

FEC ID number of contributing federal political committee. **C 0 0 3 0 1 3 5 8**

Name of Employer **BCBSKC** Occupation **VP**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5 0 0 0 0

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 1 2

Amount of Each Receipt this Period
5 0 0 0 0

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5 0 0 0 0
TOTAL This Period (last page this line number only).....▶	6 8 0 0 0

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 1 OF 1				
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of Kansas City Political Action Committee

A. Full Name (Last, First, Middle Initial) Hartzler, Vicky		Date of Disbursement MM / DD / YYYY 05 / 11 / 2012	
Mailing Address P. O. Box 531			
City Harrisonville,	State MO	Zip Code 64701	
Purpose of Disbursement Contribution		Category/ Type 1 1	Amount of Each Disbursement this Period 1,000.00
Candidate Name Hartzler, Vicky			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MO District: 4th			

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	1,000.00
TOTAL This Period (last page this line number only).....▶	1,000.00

12030862597

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *FedEx* Shipping Date
7/26/14
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

[Signature]
PREPARER
(3/2005)

7/27/14
DATE PREPARED

88529805021