



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Blue Cross Blue Shield of Alabama PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		<input type="text" value="172042.59"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="172042.59"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="11585.74"/>	<input type="text" value="11585.74"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="183628.33"/>	<input type="text" value="183628.33"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2600.00"/>	<input type="text" value="2600.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="181028.33"/>	<input type="text" value="181028.33"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Blue Cross Blue Shield of Alabama PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	9999.92	9999.92
(ii) Unitemized .....	1585.82	1585.82
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	11585.74	11585.74
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	11585.74	11585.74
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))..... ▶	11585.74	11585.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	11585.74	11585.74

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2600.00	2600.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2600.00	2600.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2600.00	2600.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	11585.74	11585.74
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11585.74	11585.74
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) <b>A. B. Scott McGlaun</b>			Date of Receipt M M / D D / Y Y Y Y 01 / 21 / 2014 <b>Transaction ID : 7954168</b>
Mailing Address 686 Founders Park Dr			Amount of Each Receipt this Period 2500.00
City Birmingham	State AL	Zip Code 35226-3730	Lump Sum
FEC ID number of contributing federal political committee. C			
Name of Employer BCBS Alabama	Occupation Senior VP&CIO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>B. Tim Sexton</b>			Date of Receipt M M / D D / Y Y Y Y 01 / 27 / 2014 <b>Transaction ID : 7965116</b>
Mailing Address 2000 Trammell Chase Dr			Amount of Each Receipt this Period 2500.00
City Birmingham	State AL	Zip Code 35244-1650	Lump Sum
FEC ID number of contributing federal political committee. C			
Name of Employer BCBS Alabama	Occupation Chief Marketing Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>C. Robert R Orr</b>			Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2014 <b>Transaction ID : PR7882299207</b>
Mailing Address 1905 Balfour Dr			Amount of Each Receipt this Period 208.33
City Birmingham	State AL	Zip Code 35216-2703	P/R Deduction (\$208.33 Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer BCBS Alabama	Occupation VP Customer Service		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.33		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5208.33
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 15
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Timothy Vines</b>		Date of Receipt MM / DD / YYYY 01 / 31 / 2014 <b>Transaction ID : PR7882309207</b>
Mailing Address 717 Savannah Pl		Amount of Each Receipt this Period 208.33
City Birmingham	State AL	Zip Code 35226-3262
FEC ID number of contributing federal political committee.	C	
Name of Employer BCBS Alabama	Occupation Chief Administrative Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.33	
		P/R Deduction (\$208.33 Monthly)

Full Name (Last, First, Middle Initial) <b>B. Dick Dowling Briggs</b>		Date of Receipt MM / DD / YYYY 01 / 31 / 2014 <b>Transaction ID : PR7882589207</b>
Mailing Address 4327 Kennesaw Dr		Amount of Each Receipt this Period 208.33
City Birmingham	State AL	Zip Code 35213-3311
FEC ID number of contributing federal political committee.	C	
Name of Employer BCBS Alabama	Occupation SVP Business Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.33	
		P/R Deduction (\$208.33 Monthly)

Full Name (Last, First, Middle Initial) <b>C. Noel W Carden</b>		Date of Receipt MM / DD / YYYY 01 / 31 / 2014 <b>Transaction ID : PR7882639207</b>
Mailing Address 5783 Cypress Trce		Amount of Each Receipt this Period 208.33
City Birmingham	State AL	Zip Code 35244-5481
FEC ID number of contributing federal political committee.	C	
Name of Employer BCBS Alabama	Occupation VP and Chief Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.33	
		P/R Deduction (\$208.33 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	624.99
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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

**A. Tony H Carter**  
Full Name (Last, First, Middle Initial)  
Mailing Address 156 Stonegate Dr  
City Birmingham State AL Zip Code 35242-7054  
FEC ID number of contributing federal political committee. **C**  
Name of Employer BCBS Alabama Occupation VP Consumer Insurance Sales  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 208.33

Date of Receipt 01 / 31 / 2014  
**Transaction ID : PR7882649207**  
Amount of Each Receipt this Period 208.33  
P/R Deduction (\$208.33 Monthly)

**B. Rebekah Elgin Council**  
Full Name (Last, First, Middle Initial)  
Mailing Address 919 38th St S  
City Birmingham State AL Zip Code 35222-3602  
FEC ID number of contributing federal political committee. **C**  
Name of Employer BCBS Alabama Occupation VP Marketing  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 208.33

Date of Receipt 01 / 31 / 2014  
**Transaction ID : PR7882699207**  
Amount of Each Receipt this Period 208.33  
P/R Deduction (\$208.33 Monthly)

**C. Joseph Edward Dunsmore**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4474 Heritage Park Dr  
City Birmingham State AL Zip Code 35226-4171  
FEC ID number of contributing federal political committee. **C**  
Name of Employer BCBS Alabama Occupation VP Application Development  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 208.33

Date of Receipt 01 / 31 / 2014  
**Transaction ID : PR7882769207**  
Amount of Each Receipt this Period 208.33  
P/R Deduction (\$208.33 Monthly)

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 15
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Brian D Edwards</b>			Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2014 <b>Transaction ID : PR7882779207</b>
Mailing Address 107 Eagle Cove Dr			Amount of Each Receipt this Period 208.33
City Pelham	State AL	Zip Code 35124-2223	P/R Deduction (\$208.33 Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer BCBS Alabama	Occupation VP Controller		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.33		

Full Name (Last, First, Middle Initial) <b>B. Joseph J Hall</b>			Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2014 <b>Transaction ID : PR7882839207</b>
Mailing Address 1808 Pinehurst Ln			Amount of Each Receipt this Period 208.33
City Birmingham	State AL	Zip Code 35226-2725	P/R Deduction (\$208.33 Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer BCBS Alabama	Occupation VP Technology Support		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.33		

Full Name (Last, First, Middle Initial) <b>C. Edward O Harris</b>			Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2014 <b>Transaction ID : PR7882859207</b>
Mailing Address 3325 Brook Highland Cir			Amount of Each Receipt this Period 208.33
City Birmingham	State AL	Zip Code 35242-5816	P/R Deduction (\$208.33 Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer BCBS Alabama	Occupation VP Network Contracting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.33		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	624.99
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Blue Cross Blue Shield of Alabama PAC**

Full Name (Last, First, Middle Initial)  
**A. Jeffrey A Ingrum**

Mailing Address 4008 Charring Cross Ln

City Birmingham State AL Zip Code 35226-2092

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

Name of Employer BCBS Alabama Occupation SVP Health Care Networks

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **208.33**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**01 / 31 / 2014**

**Transaction ID : PR7882929207**

Amount of Each Receipt this Period  
**208.33**

P/R Deduction (\$208.33 Monthly)

Full Name (Last, First, Middle Initial)  
**B. Terry D Kellogg**

Mailing Address 1230 Glen View Rd

City Birmingham State AL Zip Code 35222-4317

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

Name of Employer BCBS Alabama Occupation President and CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **208.33**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**01 / 31 / 2014**

**Transaction ID : PR7882969207**

Amount of Each Receipt this Period  
**208.33**

P/R Deduction (\$208.33 Monthly)

Full Name (Last, First, Middle Initial)  
**C. Timothy L Kirkpatrick**

Mailing Address 5606 Lake Trace Dr

City Birmingham State AL Zip Code 35244-3967

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

Name of Employer BCBS Alabama Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **208.33**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**01 / 31 / 2014**

**Transaction ID : PR7883009207**

Amount of Each Receipt this Period  
**208.33**

P/R Deduction (\$208.33 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>624.99</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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

Full Name (Last, First, Middle Initial) <b>A. Sherrie D LeMier</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 31 / 2014 <b>Transaction ID : PR7883039207</b>
Mailing Address 2448 Lancaster Cir		Amount of Each Receipt this Period 208.33
City Birmingham	State AL	Zip Code 35242-4420
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$208.33 Monthly)
Name of Employer BCBS Alabama	Occupation President & COO HBS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.33	

Full Name (Last, First, Middle Initial) <b>B. Eugene E Linton</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 31 / 2014 <b>Transaction ID : PR7883059207</b>
Mailing Address 6163 Rushing Parc Ln		Amount of Each Receipt this Period 208.33
City Birmingham	State AL	Zip Code 35244-6756
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$208.33 Monthly)
Name of Employer BCBS Alabama	Occupation VP Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.33	

Full Name (Last, First, Middle Initial) <b>C. Carol D Mackin</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 31 / 2014 <b>Transaction ID : PR7883079207</b>
Mailing Address 809 Royal Ter		Amount of Each Receipt this Period 208.33
City Birmingham	State AL	Zip Code 35242-7222
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$208.33 Monthly)
Name of Employer BCBS Alabama	Occupation VP Corp Comm/Community Rel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.33	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	624.99
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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

Full Name (Last, First, Middle Initial) <b>A. Douglas E McIntyre</b>		Date of Receipt
Mailing Address 3489 Birchwood Ln		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
Birmingham	AL	35243-4434
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : PR7883099207</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
BCBS Alabama	VP Network Operations	<input type="text" value="208.33"/>
Receipt For:	Aggregate Year-to-Date ▼	P/R Deduction (\$208.33 Monthly)
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="208.33"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. John Matthew Moor</b>		Date of Receipt
Mailing Address 18 Montcrest Dr		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
Birmingham	AL	35213-3022
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : PR7883139207</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
BCBS Alabama	VP UTIC	<input type="text" value="208.33"/>
Receipt For:	Aggregate Year-to-Date ▼	P/R Deduction (\$208.33 Monthly)
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="208.33"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Ashley S Mosko</b>		Date of Receipt
Mailing Address 503 Olmsted St		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
Birmingham	AL	35242-1825
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : PR7883179207</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
BCBS Alabama	VP Health Management	<input type="text" value="208.33"/>
Receipt For:	Aggregate Year-to-Date ▼	P/R Deduction (\$208.33 Monthly)
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="208.33"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="624.99"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 13 OF 15  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

Full Name (Last, First, Middle Initial)  
**A. Michael L Patterson**

Mailing Address 1809 Lucinda Robey Pl

City Birmingham State AL Zip Code 35211-3872

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

Name of Employer BCBS Alabama Occupation SVP and Chief Legal Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **208.33**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**01 / 31 / 2014**

**Transaction ID : PR7883209207**

Amount of Each Receipt this Period  
**208.33**

P/R Deduction (\$208.33 Monthly)

Full Name (Last, First, Middle Initial)  
**B. Vickie Ledbetter Saxon**

Mailing Address 4127 Heatherhedge Ln

City Birmingham State AL Zip Code 35226-2095

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

Name of Employer BCBS Alabama Occupation SVP Enterprise Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **208.33**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**01 / 31 / 2014**

**Transaction ID : PR7883279207**

Amount of Each Receipt this Period  
**208.33**

P/R Deduction (\$208.33 Monthly)

Full Name (Last, First, Middle Initial)  
**C. Cynthia M Vice**

Mailing Address 936 Beech Ln

City Birmingham State AL Zip Code 35213-2024

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

Name of Employer BCBS Alabama Occupation SVP & Chief Financial Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **208.33**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**01 / 31 / 2014**

**Transaction ID : PR7883439207**

Amount of Each Receipt this Period  
**208.33**

P/R Deduction (\$208.33 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **624.99**

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

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

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

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

Full Name (Last, First, Middle Initial) <b>A. Brandon S Ward</b>			Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2014 <b>Transaction ID : PR7883469207</b>
Mailing Address 109 Coshatt Trl			Amount of Each Receipt this Period 208.33
City Birmingham	State AL	Zip Code 35244-2439	P/R Deduction (\$208.33 Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer BCBS Alabama	Occupation VP Business Services		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.33		

Full Name (Last, First, Middle Initial) <b>B. James S Hill</b>			Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2014 <b>Transaction ID : PR9404289207</b>
Mailing Address 130 Hampton Drive			Amount of Each Receipt this Period 208.33
City Pelham	State AL	Zip Code 35244	P/R Deduction (\$208.33 Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer BCBS AL	Occupation VP Claims & Benefit Admin		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.33		

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Receipt M M / D D / Y Y Y Y
Mailing Address			Amount of Each Receipt this Period
City	State	Zip Code	
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	416.66
<b>TOTAL</b> This Period (last page this line number only).....▶	9999.92

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. Will Brooke for Congress, Inc.**

Mailing Address PO Box 59208

City Homewood State AL Zip Code 35259

Purpose of Disbursement  
Direct Contribution

Candidate Name

**William Brooke**

Office Sought:  House  
 Senate  
 President  
State: AL District: 06

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 31 / 2014

**Transaction ID : 7978808**

Amount of Each Disbursement this Period

2600.00

Direct Contribution

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

2600.00

2600.00