

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**Blue Cross Blue Shield of Alabama PAC**

ADDRESS (number and street) **2 North Jackson Street**  
**Suite 202**  
 Check if different than previously reported. (ACC) **Montgomery** **AL** **36104**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** **C00457242** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on **11** / **03** / **2020** in the State of **AL**  
(d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on / / in the State of

5. Covering Period **10** / **01** / **2020** through **10** / **14** / **2020**

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer **Hosp, Ted, , ,**

Signature of Treasurer **Hosp, Ted, , ,** [Electronically Filed] Date **10** / **20** / **2020**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

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="2020"/>		117078.76
(b) Cash on Hand at Beginning of Reporting Period.....	127317.75	
(c) Total Receipts (from Line 19) .....	274.69	68513.68
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	127592.44	185592.44
7. Total Disbursements (from Line 31).....	10000.00	68000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	117592.44	117592.44
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

Blue Cross Blue Shield of Alabama PAC

Report Covering the Period: From: 10 / 01 / 2020 To: 10 / 14 / 2020

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).....	273.69	60542.13
(ii) Unitemized .....	1.00	2971.55
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	274.69	63513.68
(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) .....	274.69	63513.68
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	274.69	68513.68
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	274.69	68513.68

**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	25000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	43000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	10000.00	68000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10000.00	68000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	274.69	63513.68
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	274.69	63513.68
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 11
<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**

**A. Echols, Molly, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 North Jackson St  
 City Montgomery State AL Zip Code 36104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUPAC Occupation (for Individual) Dept Mgr Internal Audit  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 337.26

Date of Receipt 10 / 14 / 2020  
**Transaction ID : PR122928050664**  
 Amount of Each Receipt this Period 16.06  
 Memo Item  
 P/R Deduction (\$16.06 Bi-Weekly)

**B. Loftin, Clay, James, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 450 Riverchase Parkway East  
 City Birmingham State AL Zip Code 35244  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUPAC Occupation (for Individual) Governmental Affairs Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 14 / 2020  
**Transaction ID : PR150458950664**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 P/R Deduction (\$25.00 Bi-Weekly)

**C. Berkery, Jonathan, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 703 Morris Blvd  
 City Birmingham State AL Zip Code 35209-6223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUPAC Occupation (for Individual) Application Dev Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 324.66

Date of Receipt 10 / 14 / 2020  
**Transaction ID : PR78825450664**  
 Amount of Each Receipt this Period 15.46  
 Memo Item  
 P/R Deduction (\$15.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	56.52
<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 7 OF 11
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Bonner, Laura, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 226 Cambo Ter  
 City Birmingham State AL Zip Code 35226-1078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUPAC Occupation (for Individual) Health Management Dept Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 14 / 2020  
**Transaction ID : PR78825550664**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 P/R Deduction (\$20.00 Bi-Weekly)

**B. Bruner, William, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 812 Hickory Trace Cir  
 City Birmingham State AL Zip Code 35244-4545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUPAC Occupation (for Individual) District Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 358.26

Date of Receipt 10 / 14 / 2020  
**Transaction ID : PR78826050664**  
 Amount of Each Receipt this Period 17.06  
 Memo Item  
 P/R Deduction (\$17.06 Bi-Weekly)

**C. Johnson, David, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2508 wilowbrook cr  
 City Birmingham State AL Zip Code 35242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUPAC Occupation (for Individual) Strategy Consult Technical Adv  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 378.00

Date of Receipt 10 / 14 / 2020  
**Transaction ID : PR78829450664**  
 Amount of Each Receipt this Period 18.00  
 Memo Item  
 P/R Deduction (\$18.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	55.06
<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 8 OF 11
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Lyda, John, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3484 Tamassee Ln  
 City Birmingham State AL Zip Code 35226-2671  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUPAC Occupation (for Individual) Manager Claims Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 14 / 2020  
**Transaction ID : PR78830650664**  
 Amount of Each Receipt this Period 15.00  
 Memo Item  
 P/R Deduction (\$15.00 Bi-Weekly)

**B. Morris, Joe, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 908 Lakeview Estates Dr  
 City Bessemer State AL Zip Code 35023-5810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUPAC Occupation (for Individual) Director Facilities Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 393.96

Date of Receipt 10 / 14 / 2020  
**Transaction ID : PR78831550664**  
 Amount of Each Receipt this Period 18.76  
 Memo Item  
 P/R Deduction (\$18.76 Bi-Weekly)

**C. Morrissette, John, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1515 Amherst Cir  
 City Birmingham State AL Zip Code 35216-1009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUPAC Occupation (for Individual) Mgr Sales Sup/Nat'l Accts  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 14 / 2020  
**Transaction ID : PR78831650664**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 P/R Deduction (\$25.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	58.76
<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 9 OF 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Parton, Christopher, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 Creekwood Ln  
 City Helena State AL Zip Code 35080-3273  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUPAC Occupation (for Individual) Director Info Security/CISO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 14 / 2020  
**Transaction ID : PR78831950664**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 P/R Deduction (\$20.00 Bi-Weekly)

**B. Sellers, Spencer, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5568 Surrey Ln  
 City Birmingham State AL Zip Code 35242-3330  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUPAC Occupation (for Individual) Sr Info Tech Risk Analyst  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 14 / 2020  
**Transaction ID : PR78833050664**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 P/R Deduction (\$10.00 Bi-Weekly)

**C. Steed, Clay, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 334 Lennox Sq  
 City Fairhope State AL Zip Code 36532-7519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUPAC Occupation (for Individual) Mgr Large Group Sales/Acct Mgt  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 295.47

Date of Receipt 10 / 14 / 2020  
**Transaction ID : PR78833350664**  
 Amount of Each Receipt this Period 14.07  
 Memo Item  
 P/R Deduction (\$14.07 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	44.07
<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 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Walden, Joseph, Clay, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14 Signal Hill Rd  
 City Spanish Fort State AL Zip Code 36527-3138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUPAC Occupation (for Individual) District Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 447.51

Date of Receipt 10 / 14 / 2020  
**Transaction ID : PR78834550664**  
 Amount of Each Receipt this Period 21.31  
 Memo Item  
 P/R Deduction (\$21.31 Bi-Weekly)

**B. Warren, Susan, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2021 Chandapine Cir  
 City Pelham State AL Zip Code 35124-1430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUPAC Occupation (for Individual) Dept Mgr Corporate Strategy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 397.32

Date of Receipt 10 / 14 / 2020  
**Transaction ID : PR78834750664**  
 Amount of Each Receipt this Period 18.92  
 Memo Item  
 P/R Deduction (\$18.92 Bi-Weekly)

**C. Watkins, James, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1935 Red Oak Ln NE  
 City Arab State AL Zip Code 35016-5360  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUPAC Occupation (for Individual) District Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.05

Date of Receipt 10 / 14 / 2020  
**Transaction ID : PR78834850664**  
 Amount of Each Receipt this Period 19.05  
 Memo Item  
 P/R Deduction (\$19.05 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	59.28
<b>TOTAL</b> This Period (last page this line number only).....	273.69

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)  
**A. Robert Aderholt for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2020

Mailing Address PO Box 1158

FEC Identification Number

**C** C00313247

**Transaction ID : 12818974**

Amount of Each Disbursement this Period

5000.00

Direct Contribution

Memo Item

City Haleyville State AL Zip Code 35565-1158

Purpose of Disbursement  
Direct Contribution

**011**  
Category/  
Type

Candidate Name  
**Aderholt, Robert, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: AL District: 04

Full Name (Last, First, Middle Initial)  
**B. Jerry Carl Victory Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		14		2020

Mailing Address PO Box 852138

FEC Identification Number

**C** C00753400

**Transaction ID : 12823978**

Amount of Each Disbursement this Period

5000.00

Direct Contribution

Memo Item

City Mobile State AL Zip Code 36685

Purpose of Disbursement  
Direct Contribution

**011**  
Category/  
Type

Candidate Name  
**Carl, Jerry, , , Jr**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: AL District: 01

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

Date of Disbursement

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

Mailing Address

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

10000.00

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

10000.00