

# 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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

ADDRESS (number and street) **50 Beale Street**  
**17-C356**  
 Check if different than previously reported. (ACC) **SAN FRANCISCO** **CA** **94105**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** **C00340364** 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  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period   /   /      through   /   /

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

Signature of Treasurer *Glidden, Emily, , ,* [Electronically Filed] Date   /   /

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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

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="2018"/>	<input type="text" value=""/>	<input type="text" value="168867.36"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="78234.47"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="13780.54"/>	<input type="text" value="174347.65"/>
(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="92015.01"/>	<input type="text" value="343215.01"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="0.00"/>	<input type="text" value="251200.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="92015.01"/>	<input type="text" value="92015.01"/>
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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 11 / 27 / 2018 To: 12 / 31 / 2018

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).....	12858.54	131783.63
(ii) Unitemized .....	922.00	42564.02
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	13780.54	174347.65
(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) .....	13780.54	174347.65
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)).....▶	13780.54	174347.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	13780.54	174347.65

**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.....	0.00	251200.00
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)) ..	0.00	251200.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	251200.00

**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) .....	13780.54	174347.65
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13780.54	174347.65
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 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Acosta, Fernando, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx8148  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21067**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Alonzo, Edgar, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx2843  
 50 Beale Street  
 City San Francisco State CA Zip Code 94030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) HR Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21070**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll Contribution per cycle \$15.00

**C. Alvarez, Tracy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Emp #xx0661  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21071**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<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 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Ayers, Joanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx4008  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21072**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

**B. Bailet, Jeffrey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx4353  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) EVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21073**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 Payroll Contribution per cycle \$100.00

**C. Baker, Alison, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx7093  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21074**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	240.00
<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 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Baker, Terri, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx1950, 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 702.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21075**  
 Amount of Each Receipt this Period 54.00  
 Memo Item  
 Payroll Contribution per cycle \$27.00

**B. Baki, Claire, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx2953 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Mgr.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 299.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21076**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 Payroll Contribution per cycle \$5.00

**C. Baldi, Phillip, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx6202 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Medical Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21077**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 114.00  
**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: (check only one)	PAGE 9 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Balousek, Bret, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx527  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21078**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Banghart, Patrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx5427  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Analyst  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21079**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

**C. Barnes, Tracy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx2076  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21080**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Contribution per cycle \$50.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 170.00  
**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: (check only one)	PAGE 10 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Barnhart, Tori, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018 <b>Transaction ID : SA11AI.21081</b>
Mailing Address Employee# xx7483 50 Beale Street		Amount of Each Receipt this Period 30.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll Contribution per cycle \$15.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Bassett, Michael, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018 <b>Transaction ID : SA11AI.21082</b>
Mailing Address Employee # xx2676 50 Beale Street		Amount of Each Receipt this Period 50.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll Contribution per cycle \$25.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Battin, David, A., ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018 <b>Transaction ID : SA11AI.21083</b>
Mailing Address Employee #xx4657 50 Beale St.,		Amount of Each Receipt this Period 40.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll Contribution per cycle \$20.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	120.00
<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 91
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Baumgardner, Sharon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx8428  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21084**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**B. Bell, Ronda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx7066  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21087**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll Contribution per cycle \$15.00

**C. Bergman, Patrice, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx6395  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21088**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	116.00
<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 12 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Bergstrom, Melinda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx2057  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21089**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Payroll Contribution per cycle \$20.00

**B. Beuoy, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# 5248  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21090**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**C. Blakeman, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee#xx1919  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21093**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll Contribution per cycle \$30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<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 13 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Blanton, Quentin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx2320  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21094**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**B. Bleau, Jason, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx1927  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21095**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**C. Boudreau, Theresa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx3316  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21096**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll Contribution per cycle \$15.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	102.00
<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 14 OF 91
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Boul, Wendy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee# xx0289  
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21097**

Amount of Each Receipt this Period  
 20.00

Memo Item  
 Payroll Contribution per cycle \$10.00

**B. Bourn, Courtney, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address emp xx6228  
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 312.00

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21098**

Amount of Each Receipt this Period  
 24.00

Memo Item  
 Payroll Contribution per cycle \$12.00

**C. Branch, Cherie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee # xx2035  
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 270.00

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21099**

Amount of Each Receipt this Period  
 36.00

Memo Item  
 Payroll Contribution per cycle \$18.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 80.00

**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: (check only one)	PAGE 15 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Braza, Carlo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx1673  
 50 Beale street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Senior Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21100**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**B. Brits, Ruta, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx2060  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21101**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Payroll Contribution per cycle \$20.00

**C. Brown, Carlos, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx3048  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21102**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	112.00
<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 16 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Brown, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Emp #xx0647  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21103**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Brown, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx9004, 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 822.64

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21104**  
 Amount of Each Receipt this Period  
 63.28  
 Memo Item  
 Payroll Contribution per cycle \$31.64

**C. Buchert, Greg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx4682  
 50 Beale Street  
 City San Francisco State CA Zip Code 94030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) President - Care1st  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2730.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21105**  
 Amount of Each Receipt this Period  
 210.00  
 Memo Item  
 Payroll Contribution per cycle \$105.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	323.28
<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 17 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Canter, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx3954  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21109**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**B. Casey, Rebecca, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx5060  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21110**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**C. Castanon, Lori, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx6314  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21111**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	92.00
<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 18 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Casten, Kristen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx8146  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21112**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

**B. Casulo, Adriel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx6492  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21113**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**C. Cates, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx8886  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21114**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	106.00
<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 19 OF 91
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Cemo, Summer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx3503  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 858.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21115**  
 Amount of Each Receipt this Period 66.00  
 Memo Item  
 Payroll Contribution per cycle \$33.00

**B. Cerf, Kristen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx3590  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Assoc General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21116**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**C. Chadwell, George, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx0628  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 371.28

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21117**  
 Amount of Each Receipt this Period 28.56  
 Memo Item  
 Payroll Contribution per cycle \$14.28

<b>SUBTOTAL</b> of Receipts This Page (optional).....	144.56
<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 20 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Chang, Doris, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx8233  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21119**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Chasin, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx8020  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21120**  
 Amount of Each Receipt this Period 300.00  
 Memo Item  
 Payroll Contribution per cycle \$150.00

**C. Chayt, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx3401  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Assoc. General Counsel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21121**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<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 21 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Chen, Wayne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx4216  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21122**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Ciufo, Denise, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx4063, 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21123**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll Contribution per cycle \$15.00

**C. Clark, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx3881  
 50 Beale St.,  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21124**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<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 22 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Cohen, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx4352  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1560.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21125**  
 Amount of Each Receipt this Period 120.00  
 Memo Item  
 Payroll Contribution per cycle \$60.00

**B. Comporato, Andrea, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx4824  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21126**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**C. Connell, Kristen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx4359  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21127**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 192.00  
**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: (check only one)	PAGE 23 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Cox, Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx5430  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21130**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Crawley, Bryan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx7742  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21131**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

**C. Crea, Kimberly A, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx5254  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21132**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 120.00  
**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: (check only one)	PAGE 24 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Dab, Deborah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx5054  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Principal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21133**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**B. Dahlem, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Emp# xx1109  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21134**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**C. Dailey, Carla M, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Emp# xx0442  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21135**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	136.00
<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 25 OF 91
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Dansky, Tanya, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx4732  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) CMO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 670.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21136**  
 Amount of Each Receipt this Period 70.00  
 Memo Item  
 Payroll Contribution per cycle \$35.00

**B. Danupatampa, Esther, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx4390  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21137**  
 Amount of Each Receipt this Period 24.00  
 Memo Item  
 Payroll Contribution per cycle \$12.00

**C. Datcher, Shannon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx7287  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21138**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	144.00
<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 26 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Davis Majewski, Becky, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx4605  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21139**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. DeBartoli, Jodie, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx1900  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21140**  
 Amount of Each Receipt this Period 24.00  
 Memo Item  
 Payroll Contribution per cycle \$12.00

**C. Dehart, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx0621  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Consultant Lead  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21141**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	110.00
<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 27 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Dekeyzer, Marilyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx4798  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21142**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Devine, Renee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Emp# xx0495  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21143**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**C. Dharmar, Rajkumar, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx8261  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21144**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 136.00  
**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: (check only one)	PAGE 28 OF 91
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Dixit, Anshul, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018 <b>Transaction ID : SA11AI.21146</b>
Mailing Address Employee # xx5104 50 Beale Street			Amount of Each Receipt this Period 50.00
City San Francisco	State CA	Zip Code 94105	<input type="checkbox"/> Memo Item Payroll Contribution per cycle \$25.00
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Blue Shield of CA		Occupation (for Individual) Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Donohue, Tina, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018 <b>Transaction ID : SA11AI.21147</b>
Mailing Address emp xx2241 50 Beale Street			Amount of Each Receipt this Period 20.00
City San Francisco	State CA	Zip Code 94105	<input type="checkbox"/> Memo Item Payroll Contribution per cycle \$10.00
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Blue Shield of California		Occupation (for Individual) Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Drahmann, David, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018 <b>Transaction ID : SA11AI.21148</b>
Mailing Address Employee #xx7100 50 Beale Street			Amount of Each Receipt this Period 50.00
City San Francisco	State CA	Zip Code 94105	<input type="checkbox"/> Memo Item Payroll Contribution per cycle \$25.00
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Blue Shield of CA		Occupation (for Individual) Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 650.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	120.00
<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 29 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Dutra, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx3097  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21149**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**B. Ebrahimi, Angela, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx7994  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Mgr.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21150**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**C. Edwards, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx3066  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21151**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	108.00
<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 30 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Eisenstein, Marc, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx7084  
 50 Beale St.,  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21152**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

**B. Ejuwa, Jacqueline, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx3113  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1170.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21153**  
 Amount of Each Receipt this Period 90.00  
 Memo Item  
 Payroll Contribution per cycle \$45.00

**C. Ellis, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx2404  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) General Counsel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21154**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Payroll Contribution per cycle \$20.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 150.00  
**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: (check only one)	PAGE 31 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Ferguson, Kathryn, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx2319  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21155**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Payroll Contribution per cycle \$20.00

**B. Ferguson, Wendell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx8274  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21156**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**C. Fisher, Laura, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx1784  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21157**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 126.00  
**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: (check only one)	PAGE 32 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Flaum, Amanda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx1242  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21158**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Flinders, Marci, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx5113  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21159**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

**C. Florez, Hugo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx1071  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21160**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 106.00  
**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: (check only one)	PAGE 33 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. floyd, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx5446  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21161**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Forte, Amber, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx4218  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21162**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**C. Fortino, Dawn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx8687  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21163**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	136.00
<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 34 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Foy, Sandra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx0928  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21164**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**B. Frye, Erika, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx8832  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21167**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**C. Furtado, Miguel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx1053  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21168**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	108.00
<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 35 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Gaines, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx4561  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21169**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

**B. Gannon, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx2952  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21170**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**C. Gayken, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx5438  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 324.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21171**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	92.00
<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 36 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Gebhart, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Emp# xx7244  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21172**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll Contribution per cycle \$30.00

**B. Gensch, Devin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx4081  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 728.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21173**  
 Amount of Each Receipt this Period 56.00  
 Memo Item  
 Payroll Contribution per cycle \$28.00

**C. Gibson Pace, Diana, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx0252  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21174**  
 Amount of Each Receipt this Period 70.00  
 Memo Item  
 Payroll Contribution per cycle \$35.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 186.00  
**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: (check only one)	PAGE 37 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Gilliland, Terry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx5469  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) SVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21175**  
 Amount of Each Receipt this Period  
 140.00  
 Memo Item  
 Payroll Contribution per cycle \$70.00

**B. Gillis, Heather, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx3333  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21176**  
 Amount of Each Receipt this Period  
 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**C. Goldberg, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx4504  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21177**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	226.00
<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 38 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Gonzales, Celia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx5859  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21178**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**B. Goode, Kimberley, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx4855  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1820.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21179**  
 Amount of Each Receipt this Period 140.00  
 Memo Item  
 Payroll Contribution per cycle \$70.00

**C. Gorakshakar, Poonam, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx1791  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21180**  
 Amount of Each Receipt this Period 24.00  
 Memo Item  
 Payroll Contribution per cycle \$12.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 200.00  
**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: (check only one)	PAGE 39 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Gregg, Christy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx2233  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21181**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Grivett, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx3781  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21182**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**C. Guarino, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx8766  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21183**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 106.00  
**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: (check only one)	PAGE 40 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Guerridos, Raul E, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Emp# xx2698  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21184**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**B. Gustavson, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx5452  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21186**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**C. Harmatz, Jill, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx5510  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21187**  
 Amount of Each Receipt this Period 24.00  
 Memo Item  
 Payroll Contribution per cycle \$12.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	96.00
<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 41 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Harris, Myrta, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx3364  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21190**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Harris, Staci, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx8450  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 598.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21191**  
 Amount of Each Receipt this Period 46.00  
 Memo Item  
 Payroll Contribution per cycle \$23.00

**C. Hendrickson, Ruth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 3054  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1170.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21192**  
 Amount of Each Receipt this Period 90.00  
 Memo Item  
 Payroll Contribution per cycle \$45.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 186.00  
**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: (check only one)	PAGE 42 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Hermosillo, Sarah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 7363  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21193**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Hilty, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx9314  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21196**  
 Amount of Each Receipt this Period 70.00  
 Memo Item  
 Payroll Contribution per cycle \$35.00

**C. Hoffman, Helena, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx5671  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21198**  
 Amount of Each Receipt this Period 22.00  
 Memo Item  
 Payroll Contribution per cycle \$11.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	142.00
<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 43 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Hopkins, Kimberly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx8896  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21199**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

**B. Hornbacher, Stanford, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx6615  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of Callifornia Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21200**  
 Amount of Each Receipt this Period 45.00  
 Memo Item  
 Payroll Contribution per cycle \$22.50

**C. Huber, Christopher, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx7445  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21201**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 101.00  
**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: (check only one)	PAGE 44 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Hurd, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx6366  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21202**  
 Amount of Each Receipt this Period  
 60.00  
 Memo Item  
 Payroll Contribution per cycle \$30.00

**B. Jacobs, Seth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx6574  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Sr. VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21205**  
 Amount of Each Receipt this Period  
 150.00  
 Memo Item  
 Payroll Contribution per cycle \$75.00

**C. Jmath, Pooja, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21207**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	260.00
<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 45 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Ju, Sugene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 4170  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21208**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**B. Kallan, David, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx6424  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21209**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

**C. Kalyan, Krishna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx3135  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21210**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	106.00
<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 46 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Karrobi, Syng, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018
Mailing Address Employee# xx4555 50 Beale Street			<b>Transaction ID : SA11AI.21211</b>
City San Francisco	State CA	Zip Code 94105	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Contribution per cycle \$25.00
Name of Employer (for Individual) Blue Shield of CA		Occupation (for Individual) Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Kaufman, Jessica, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018
Mailing Address Employee # xx 9078 50 Beale Street			<b>Transaction ID : SA11AI.21212</b>
City San Francisco	State CA	Zip Code 94105	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Contribution per cycle \$10.00
Name of Employer (for Individual) Blue Shield of CA		Occupation (for Individual) Sr. Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Kaur, Aabneet, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018
Mailing Address Employee # xx1488 50 Beale Street			<b>Transaction ID : SA11AI.21213</b>
City San Francisco	State CA	Zip Code 94105	Amount of Each Receipt this Period 36.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Contribution per cycle \$18.00
Name of Employer (for Individual) Blue Shield of CA		Occupation (for Individual) Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 468.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	106.00
<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 47 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Kawamoto, Allison, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx4997  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 398.06

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21214**  
 Amount of Each Receipt this Period 30.62  
 Memo Item  
 Payroll Contribution per cycle \$15.31

**B. Khanna, Amit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 1235  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21215**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

**C. Khemani, Pradip, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx7222  
 50 Beale St.,  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21216**  
 Amount of Each Receipt this Period 70.00  
 Memo Item  
 Payroll Contribution per cycle \$35.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	120.62
<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 48 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Kibler, Tina, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018
Mailing Address emp xx5267 50 Beale Street		<b>Transaction ID : SA11AI.21217</b>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 134.00
Name of Employer (for Individual) Blue Shield of California	Occupation (for Individual) VP	<input type="checkbox"/> Memo Item Payroll Contribution per cycle \$67.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1742.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Kiefer, Andrew, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018
Mailing Address Employee #xx8277 50 Beale Street		<b>Transaction ID : SA11AI.21218</b>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 130.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Director	<input type="checkbox"/> Memo Item Payroll Contribution per cycle \$65.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1690.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Kiley, James, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018
Mailing Address Employee# xx8889 50 Beale Street		<b>Transaction ID : SA11AI.21219</b>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Director	<input type="checkbox"/> Memo Item Payroll Contribution per cycle \$25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 650.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	314.00
<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 49 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Kim, Keith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx5487  
 50 Beale St.,  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21220**  
 Amount of Each Receipt this Period 70.00  
 Memo Item  
 Payroll Contribution per cycle \$35.00

**B. Kim, Yun, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx9394  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21221**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll Contribution per cycle \$15.00

**C. Kim, Yunkyung, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 5065  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 820.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21222**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Contribution per cycle \$50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<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 50 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Knudsen, Amanda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx3382  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Assoc. General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21224**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**B. Lam, Nora, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx5642  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21225**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll Contribution per cycle \$15.00

**C. Langum, Rebecca, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx2976  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21226**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 102.00  
**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: (check only one)	PAGE 51 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Lautsch, Kenneth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 5111  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21227**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll Contribution per cycle \$30.00

**B. Leaf, Alex, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 1190  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21228**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

**C. Lee, Ellen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx4606, 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21229**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll Contribution per cycle \$15.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	110.00
<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 52 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Leland, Maureen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 2874  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21230**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**B. Leone, Maria, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx0260  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 598.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21231**  
 Amount of Each Receipt this Period 46.00  
 Memo Item  
 Payroll Contribution per cycle \$23.00

**C. Loving III, Alvin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx7643  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21233**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	132.00
<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 53 OF 91
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Lowe, Pamela, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx4473  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21234**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**B. Luippold, Analisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx6832  
 50 Beale St.,  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21236**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**C. Lum, Alison, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx8386  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21237**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	136.00
<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 54 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Lynaugh, Kathleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address emp xx9411  
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1040.00

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21238**

Amount of Each Receipt this Period  
 80.00

Memo Item  
 Payroll Contribution per cycle \$40.00

**B. Lyster, Deborah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee# xx0804  
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 468.00

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21239**

Amount of Each Receipt this Period  
 36.00

Memo Item  
 Payroll Contribution per cycle \$18.00

**C. Maguire, Steven, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee # xx 4175  
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 468.00

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21240**

Amount of Each Receipt this Period  
 36.00

Memo Item  
 Payroll Contribution per cycle \$18.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 152.00

**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: (check only one)	PAGE 55 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Marcoccia, Sibylle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx5264  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Analyst  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21241**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**B. Markovich, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx6510  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21242**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 Payroll Contribution per cycle \$100.00

**C. Marshall, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx8149  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21243**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	272.00
<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 56 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Matsuda, Russell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx0289  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21244**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**B. Mayer, Antoinette, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx1496  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21245**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**C. Mayhew, Todd, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 5058  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1170.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21246**  
 Amount of Each Receipt this Period 90.00  
 Memo Item  
 Payroll Contribution per cycle \$45.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	176.00
<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 57 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. McFarland, Shelley, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx1236, 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 269.88

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21249**  
 Amount of Each Receipt this Period 20.76  
 Memo Item  
 Payroll Contribution per cycle \$10.38

**B. McGrain, Blair, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 4358 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Head  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21250**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**C. McNeil, Frances, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx6964 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Counsel Lead  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21251**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	90.76
<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 58 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Mcniff, Nicole, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx5458  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21252**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**B. Meinhofer, Steven, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx8066  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21253**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll Contribution per cycle \$15.00

**C. Minarcin, Andrea, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Beale Street  
 employee #xx4753  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21255**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 116.00  
**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: (check only one)	PAGE 59 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Mixon, Haley, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx3986  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21256**  
 Amount of Each Receipt this Period  
 60.00  
 Memo Item  
 Payroll Contribution per cycle \$30.00

**B. Monterola, Rufino, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx2942  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21257**  
 Amount of Each Receipt this Period  
 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**C. Moore, Jaynene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx2572  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21258**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item  
 Payroll Contribution per cycle \$15.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	126.00
<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 60 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Morgan, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) SVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21259**  
 Amount of Each Receipt this Period 140.00  
 Memo Item  
 Payroll Contribution per cycle \$70.00

**B. Moynihan, Desmond, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx1804 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21260**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Payroll Contribution per cycle \$20.00

**C. Mullany, Kristin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx8111 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Chief of Staff  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21261**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	230.00
<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 61 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Murray, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx6809  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21262**  
 Amount of Each Receipt this Period  
 40.00  
 Memo Item  
 Payroll Contribution per cycle \$20.00

**B. Murray, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx1032  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) CFO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21263**  
 Amount of Each Receipt this Period  
 120.00  
 Memo Item  
 Payroll Contribution per cycle \$60.00

**C. Nast, Michelle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx2744  
 50 Beale St.,  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 324.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21264**  
 Amount of Each Receipt this Period  
 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	196.00
<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 62 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Nguyen, Kim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 5068  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21265**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**B. Novarr, Jason, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx4346  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Assoc. General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21266**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

**C. Nye, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx3144  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1690.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21267**  
 Amount of Each Receipt this Period 130.00  
 Memo Item  
 Payroll Contribution per cycle \$65.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	186.00
<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 63 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. O'Hara, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx0977  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) SVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1820.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21268**  
 Amount of Each Receipt this Period 140.00  
 Memo Item  
 Payroll Contribution per cycle \$70.00

**B. O'Neill, Timothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx8459  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21269**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**C. Ocepek, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx1761  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21270**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	240.00
<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 64 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Odette, Terese, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx7096  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21271**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Ogbu, Vanessa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 4604  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21272**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll Contribution per cycle \$15.00

**C. Oshel, Nicole, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx4499  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 324.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21273**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	116.00
<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 65 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Osorio, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 5790  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21274**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Padilla, Ana, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx6534  
 50 Beale St.,  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Phone Representative  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21276**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

**C. Palko, Peter, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx0467  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21277**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	120.00
<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 66 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Panek, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx8535  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Medical Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21278**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Papouchian-Kulinski, Armine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx5680  
 50 Beale St.,  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21279**  
 Amount of Each Receipt this Period 80.00  
 Memo Item  
 Payroll Contribution per cycle \$40.00

**C. Paredes, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx1203  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 598.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21280**  
 Amount of Each Receipt this Period 46.00  
 Memo Item  
 Payroll Contribution per cycle \$23.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 176.00  
**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: (check only one)	PAGE 67 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Parker, Chad, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx8331  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21281**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll Contribution per cycle \$15.00

**B. Patel, Amul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx5255  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21282**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**C. Prather, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx5817  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21284**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 100.00  
**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: (check only one)	PAGE 68 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Prettyman, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx5418  
 50 Beale St.  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21285**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Ramey, Alison, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx2396  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21286**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**C. Raongthum, Anchulee J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Emp# xx6257  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21287**  
 Amount of Each Receipt this Period 46.00  
 Memo Item  
 Payroll Contribution per cycle \$23.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 146.00  
**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: (check only one)	PAGE 69 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Rapp, Jordan, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx6171  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21288**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

**B. Rau, Carsten, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx3095  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21289**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**C. Reeder, Marcella, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx2415  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21290**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 106.00  
**TOTAL** This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 70 OF 91
Use separate schedule(s) for each category of the Detailed Summary Page
FOR LINE NUMBER: (check only one)
11a 11b 11c 12 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Rinaldi, Karen, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address emp xx1645
50 Beale Street
City San Francisco State CA Zip Code 94105
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 361.14

Date of Receipt 12 / 31 / 2018
Transaction ID : SA11AI.21291
Amount of Each Receipt this Period 27.78
Memo Item
Payroll Contribution per cycle \$13.89

B. Robertson, Jeffrey, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address Employee #xx3759
50 Beale Street
City San Francisco State CA Zip Code 94105
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) SVP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 1300.00

Date of Receipt 12 / 31 / 2018
Transaction ID : SA11AI.21294
Amount of Each Receipt this Period 100.00
Memo Item
Payroll Contribution per cycle \$50.00

C. Roehm, Michael, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address Employee# xx7259
50 Beale Street
City San Francisco State CA Zip Code 94105
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 390.00

Date of Receipt 12 / 31 / 2018
Transaction ID : SA11AI.21295
Amount of Each Receipt this Period 30.00
Memo Item
Payroll Contribution per cycle \$15.00

SUBTOTAL of Receipts This Page (optional)..... 157.78
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: (check only one)	PAGE 71 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Russell, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Emp# xx0497  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21296**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Saadzo, Lina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx5649  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21297**  
 Amount of Each Receipt this Period 70.00  
 Memo Item  
 Payroll Contribution per cycle \$35.00

**C. Safran, Joseph, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx9164, 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21298**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Payroll Contribution per cycle \$20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	160.00
<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 72 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Salow, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Beale Street  
 employee # xx5516  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21300**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Saporta Cheng, Carla, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 5163  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 608.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21301**  
 Amount of Each Receipt this Period 56.00  
 Memo Item  
 Payroll Contribution per cycle \$28.00

**C. Sasaki, Lori, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx7711  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21302**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll Contribution per cycle \$15.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	136.00
<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 73 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Schulz, Shayna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx3526  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1170.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21304**  
 Amount of Each Receipt this Period 90.00  
 Memo Item  
 Payroll Contribution per cycle \$45.00

**B. Scott, Hope, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx0637  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21305**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**C. Sedo, Sandra, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx5441  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21306**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	146.00
<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 74 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Sharpsteen, Trudi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx4271  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21308**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Shaw, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx1283  
 50 Beale street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Sr. Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21309**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll Contribution per cycle \$15.00

**C. Shearer, Steve, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 4822  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1170.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21310**  
 Amount of Each Receipt this Period 90.00  
 Memo Item  
 Payroll Contribution per cycle \$45.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 170.00  
**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: (check only one)	PAGE 75 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Shen, Danny, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx2954  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21312**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Shih, Michelle, Y, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx6919  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21313**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**C. Shunglu, Anju, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx2605  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21314**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 120.00  
**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: (check only one)	PAGE 76 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Smith, Jeffrey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee# xx7922  
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 650.00

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21317**

Amount of Each Receipt this Period  
 50.00

Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Solomon, Gilbert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address emp xx1700  
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Medical Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1153.75

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21318**

Amount of Each Receipt this Period  
 92.30

Memo Item  
 Payroll Contribution per cycle \$46.15

**C. Sommercamp, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee # xx3636  
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 650.00

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21319**

Amount of Each Receipt this Period  
 50.00

Memo Item  
 Payroll Contribution per cycle \$25.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 192.30

**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: (check only one)	PAGE 77 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Spector, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx4420, 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2057.12

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21320**  
 Amount of Each Receipt this Period 158.24  
 Memo Item  
 Payroll Contribution per cycle \$79.12

**B. Speziale, Donald, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx3696 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21321**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

**C. Spicer, Catherine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx1303 50 Beale St.,  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21322**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll Contribution per cycle \$15.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	208.24
<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 78 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Starr, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 0468  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21323**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

**B. Stewart, Grant, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 8681  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21325**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll Contribution per cycle \$15.00

**C. Stuart, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx2061  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1170.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21326**  
 Amount of Each Receipt this Period 90.00  
 Memo Item  
 Payroll Contribution per cycle \$45.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	140.00
<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 79 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Su, Felix, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx3601  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21327**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**B. Sui, Wendy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx7957  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21328**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll Contribution per cycle \$15.00

**C. Summer, Sarah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address emp xx1535  
 50 Beale street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Sr. Counsel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1118.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21329**  
 Amount of Each Receipt this Period 86.00  
 Memo Item  
 Payroll Contribution per cycle \$43.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 152.00  
**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: (check only one)	PAGE 80 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Sun, Cecilia, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018 <b>Transaction ID : SA11AI.21330</b>
Mailing Address Employee # xx3131 50 Beale Street		Amount of Each Receipt this Period 120.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll Contribution per cycle \$60.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1560.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Tandon, Vikas, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018 <b>Transaction ID : SA11AI.21331</b>
Mailing Address Employee# xx4678 50 Beale Street		Amount of Each Receipt this Period 20.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll Contribution per cycle \$10.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Sr. Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Tate, Eric, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018 <b>Transaction ID : SA11AI.21332</b>
Mailing Address Employee # xx5215 50 Beale Street		Amount of Each Receipt this Period 20.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll Contribution per cycle \$10.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	160.00
<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 81 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Taylor, Jayne W, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Emp# xx5713  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21334**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Tellier-Fairey, Julie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx5238  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21335**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**C. Tolentino Lorenzo, Janice, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx4413  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager  
 Receipt For:  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼  
 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21338**  
 Amount of Each Receipt this Period  
 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	136.00
<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 82 OF 91
	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Trauth, James, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee# xx2147  
50 Beale Street

City San Francisco	State CA	Zip Code 94105
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Director
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2018

**Transaction ID : SA11AI.21339**

Amount of Each Receipt this Period  
20.00

Memo Item  
Payroll Contribution per cycle \$10.00

**B. Trenam, Joanne, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address emp xx0511, 50 Beale Street

City San Francisco	State CA	Zip Code 94105
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Shield	Occupation (for Individual) Manager
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2018

**Transaction ID : SA11AI.21340**

Amount of Each Receipt this Period  
20.00

Memo Item  
Payroll Contribution per cycle \$10.00

**C. Ullom, Regina A, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Emp# xx5624  
50 Beale Street

City San Francisco	State CA	Zip Code 94105
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Manager
--	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
468.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2018

**Transaction ID : SA11AI.21341**

Amount of Each Receipt this Period  
36.00

Memo Item  
Payroll Contribution per cycle \$18.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	76.00
<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 83 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Ulrich, Loni, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Emp# xx8333  
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 390.00

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21342**

Amount of Each Receipt this Period  
 30.00

Memo Item  
 Payroll Contribution per cycle \$15.00

**B. Valencia, Devon M, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Emp# xx2459  
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1170.00

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21343**

Amount of Each Receipt this Period  
 90.00

Memo Item  
 Payroll Contribution per cycle \$45.00

**C. Villafuerte, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee# xx5007  
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 468.00

Date of Receipt  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21345**

Amount of Each Receipt this Period  
 36.00

Memo Item  
 Payroll Contribution per cycle \$18.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 156.00

**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: (check only one)	PAGE 84 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Virgil, Millie, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018
Mailing Address Employee# xx8446 50 Beale Street		<b>Transaction ID : SA11AI.21346</b>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00	
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Head of Shared Services	<input type="checkbox"/> Memo Item Payroll Contribution per cycle \$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Vota, Paul, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018
Mailing Address employee # xx3873 50 Beale Street		<b>Transaction ID : SA11AI.21347</b>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00	
Name of Employer (for Individual) Blue Shield of California	Occupation (for Individual) Sr. Director	<input type="checkbox"/> Memo Item Payroll Contribution per cycle \$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Wagner, Jason, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018
Mailing Address Employee# xx7917 50 Beale Street		<b>Transaction ID : SA11AI.21348</b>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 24.00	
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Manager	<input type="checkbox"/> Memo Item Payroll Contribution per cycle \$12.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 312.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	64.00
<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 85 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Walthall, Todd, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx2537  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) SVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1820.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21352**  
 Amount of Each Receipt this Period 140.00  
 Memo Item  
 Payroll Contribution per cycle \$70.00

**B. Wells, Darrin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx8661  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1170.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21356**  
 Amount of Each Receipt this Period 90.00  
 Memo Item  
 Payroll Contribution per cycle \$45.00

**C. Westbrook, Zachary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx4151  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Program leader  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 478.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21357**  
 Amount of Each Receipt this Period 46.00  
 Memo Item  
 Payroll Contribution per cycle \$23.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	276.00
<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 86 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Whitelaw, Jayne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee #xx5978  
 50 Beale St.,  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21359**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Whitney, Na'Keithia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 7731  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21360**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**C. Wilkins, Kimball, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx3150  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21361**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Payroll Contribution per cycle \$15.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	130.00
<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 87 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Williams, Bryce, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx8031  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1170.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21362**  
 Amount of Each Receipt this Period  
 90.00  
 Memo Item  
 Payroll Contribution per cycle \$45.00

**B. Wilson, Lila, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx1064  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Principal  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21364**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**C. Winter, Wendy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx2464  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼  
 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21365**  
 Amount of Each Receipt this Period  
 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	176.00
<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 88 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Wong, Salina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Emp# xx3056  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21368**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**B. Woodfill, Patricia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx0849  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21369**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**C. Worbets, Jason, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx1921  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21370**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	136.00
<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 89 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Wylie, Sarah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 2362  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21371**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**B. Yan, Lily, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 5658  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21372**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**C. Yang, Winnie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx7578  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21373**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	122.00
<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 90 OF 91
<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Yao, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Beale Street  
 employee# xx5363  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21374**  
 Amount of Each Receipt this Period 70.00  
 Memo Item  
 Payroll Contribution per cycle \$35.00

**B. Yi, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx2915  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21375**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Contribution per cycle \$25.00

**C. Yokoyama, Krista, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx8246  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2018  
**Transaction ID : SA11AI.21376**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	156.00
<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 91 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Zhou, Sylvia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee # xx 5367  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21378**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Payroll Contribution per cycle \$10.00

**B. Zimmerling, Marcus, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Employee# xx5374  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2018  
**Transaction ID : SA11AI.21379**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Payroll Contribution per cycle \$18.00

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	56.00
<b>TOTAL</b> This Period (last page this line number only).....	12858.54