



**BlueCross BlueShield  
of Kansas City**

An Independent Licensee of the  
Blue Cross and Blue Shield Association

RECEIVED

2010 OCT 14 AM 11:00  
The Pershing Square  
2301 Main  
FEC MAIL CENTER  
PO Box 419169  
Kansas City, MO 64141-6169  
Telephone: (816) 395-2222  
[www.bcbskc.com](http://www.bcbskc.com)

October 13, 2010

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

RE: Blue Cross Blue Shield of Kansas City  
Federal Political Action Committee  
FEC No. C00301358  
FEC Form 3X –October 21, 2010 12-Day PRE-General Election Report

Dear Sir or Madam:

Please find enclosed for your file an original FEC Form 3X –October 21, 2010 12-Day PRE-General Election Report of Activity, submitted on behalf of Blue Cross and Blue Shield of Kansas City Federal Political Action Committee. This report covers the activity of our committee from October 1, 2010 through October 13, 2010.

Thank you for making this document a part of your files. If you have any questions, please do not hesitate to contact me at (816) 395-3498, fax 816-395-2379 or email [peggy.galvin@BlueKC.com](mailto:peggy.galvin@BlueKC.com).

Sincerely,

Peggy S. Galvin  
Government Affairs Coordinator

cc: Coni K. Fries, Federal PAC Treasurer

10030442647

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2010 OCT 14 AM 11:00  
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FEC  
FORM 3X

REPORT OF RECEIPTS  
AND DISBURSEMENTS  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5  
Blue Cross and Blue Shield of Kansas City Federal Political Action Committee

ADDRESS (number and street) One Pershing Square  
2301 Main Street  
Kansas City MO 64108

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C 00301358  
3. IS THIS REPORT X 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), 12G General (12G), Runoff (12R), Convention (12C), Special (12S)  
Election on 11 / 02 / 2010 in the State of MO KS

5. Covering Period 10 / 01 / 2010 through 10 / 13 / 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Coni K. Fries  
Signature of Treasurer Coni Fries Date 10 / 13 / 2010

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only  
FEC FORM 3X  
Rev. 12/2004

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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

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

Report Covering the Period: From: **10 / 01 / 2010** To: **10 / 13 / 2010**

10030442649

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <b>2010</b>		<b>18965.01</b>
(b) Cash on Hand at Beginning of Reporting Period.....	<b>11925.30</b>	
(c) Total Receipts (from Line 19) .....	<b>96.05</b>	<b>13324.95</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<b>12021.35</b>	<b>32289.96</b>
7. Total Disbursements (from Line 31) .....	<b>1518.09</b>	<b>21786.70</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<b>10503.26</b>	<b>10503.26</b>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	<b>0</b>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	<b>0</b>	



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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

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

Report Covering the Period: From: **10 / 01 / 2010** To: **10 / 13 / 2010**

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I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	96.05	13324.95
(ii) Unitemized .....	0	0
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	96.05	13324.95
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	96.05	13324.95
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received.....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5).....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	96.05	13324.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	96.05	13324.95

**DETAILED SUMMARY PAGE  
of Disbursements**

FEC Form 3X (Rev. 02/2003)

Page 4

**II. Disbursements**

**COLUMN A  
Total This Period**

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

**21. Operating Expenditures:**

(a) Allocated Federal/Non-Federal Activity (from Schedule H4)

(i) Federal Share .....

0

0

(ii) Non-Federal Share.....

0

0

(b) Other Federal Operating Expenditures .....

0

0

(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....

0

0

**22. Transfers to Affiliated/Other Party Committees.....**

0

8200.00

**23. Contributions to Federal Candidates/Committees and Other Political Committees.....**

1500.00

13400.00

**24. Independent Expenditures**

(use Schedule E).....

0

0

**25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....**

0

0

**26. Loan Repayments Made.....**

0

0

**27. Loans Made.....**

0

0

**28. Refunds of Contributions To:**

(a) Individuals/Persons Other Than Political Committees .....

0

0

(b) Political Party Committees .....

0

0

(c) Other Political Committees (such as PACs).....

0

0

(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....

0

0

**29. Other Disbursements Bank Service Charge.....**

18.09

186.70

**30. Federal Election Activity (2 U.S.C. §431(20))**

(a) Allocated Federal Election Activity (from Schedule H6)

(i) Federal Share .....

0

0

(ii) "Levin" Share.....

0

0

(b) Federal Election Activity Paid Entirely With Federal Funds .....

0

0

(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....

0

0

**31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..**

1518.09

21786.70

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

1518.09

21786.70

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

**III. Net Contributions/Operating Expenditures**

**COLUMN A**  
Total This Period

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

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

96.05
0
96.05
0
0
0

13324.95
0
13324.95
0
0
0

1003044252

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 1 OF 1					
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) <b>A. Tom Bowser</b>		Date of Receipt <b>10 / 04 / 2010</b>
Mailing Address <b>2301 Main Street</b>		Amount of Each Receipt this Period <b>96.05</b>
City <b>Kansas City</b>	State Zip Code <b>MO 64108</b>	
FEC ID number of contributing federal political committee. <b>C 00301358</b>		Amount of Each Receipt this Period <b>96.05</b>
Name of Employer <b>Blue Cross and Blue Shield of Kansas City</b>	Occupation <b>CEO</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1824.95</b>	

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>96.05</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>96.05</b>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 1

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

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

NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Roy Blunt**

Date of Disbursement

MM / DD / YYYY	MM / DD / YYYY	MM / DD / YYYY
10	06	2010

Mailing Address

**P. O. Box 50100**

City State Zip Code  
**Springfield MO 65805**

Purpose of Disbursement

**Candidate**

011
Category/ Type

Amount of Each Disbursement this Period

1500.00
---------

Candidate Name

**Roy Blunt**

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

State: **MO** District:

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

MM / DD / YYYY	MM / DD / YYYY	MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Amount of Each Disbursement this Period

--

Candidate Name

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

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

MM / DD / YYYY	MM / DD / YYYY	MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Amount of Each Disbursement this Period

--

Candidate Name

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

State: District:

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

**1500.00**

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

**1500.00**

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

10030442655

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <b>Fed Ex</b>	Shipping Date <b>10/13/10</b>
Next Business Day Delivery <input checked="" type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

**EA** **10/14/10**  
 PREPARER DATE PREPARED  
 (3/2005)