REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Blue PAC (Capital, Northeastern, Independence, and Western Pennsylvania Blue Cross Plans)

ADDRESS (number and street) ☐ Check if different than previously reported
Pennsylvania Blue Cross Plans
c/o Linda Melusky

CITY, STATE and ZIP CODE
2500 Elmerton Avenue
Harrisburg, PA 17177

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM
Dec 3 9 11 AM '98

2. FEC IDENTIFICATION NUMBER
C 00270967

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

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ 12-Day Pre-Election Report for the _____ _____ (Type of Election)
election on _____ in the State of _____

☐ 30-Day Post-Election Report following the General Election
on 11/3/98 in the State of PA

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 10/15/98 through 11/23/98		
6. (a) Cash on Hand January 1, 19 98		$ 19,743.43
(b) Cash on Hand at Beginning of Reporting Period	$ 9,496.19	
(c) Total Receipts (from Line 19)	$ 11,412.27	$ 89,874.46
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 20,908.46	$ 109,617.89
7. Total Disbursements (from Line 30)	$ 10,000.00	$ 98,709.43
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 10,908.46	$ 10,908.46
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$	

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

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
Linda Melusky

Signature of Treasurer
Linda Melusky

Date
12/2/98

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

FEC FORM 3X
(revised 9/93)

FEBAN121

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: Blue PAC

REPORT COVERING PERIOD FROM 10/15/98 TO: 11/23/98

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	6,402.77	35,333.16	11(a)(i)
ii. Unitemized	5,009.50	54,541.30	11(a)(ii)
iii. Total (add i and ii) ➤	11,412.27	89,874.46	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	11,412.27	89,874.46	11(d)
12. Transfers From Affiliated/Other Party Committees	11,412.27	89,874.46	12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤			19
20. Total Federal Receipts (subtract line 18 from line 19) ➤			20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤			21(c)
22. Transfers to Affiliated/Other Party Committees	1,500.00	3,800.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	(500.00)	3,000.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements	9,000.00	91,909.43	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	10,000.00	98,709.43	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	10,000.00	98,709.43	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	11,412.27	89,874.37	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	11,412.27	89,874.37	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	0.00	0.00	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	0.00	0.00	37

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11.a .L

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Butler, Christopher 1 Brampton Road Malvern, Pa 19355	Independence Blue Cross Senior Vice President	Payroll Deduction	$ 120.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 960.00		($40 bi-weekly)
B. Daddis, John 8 Glenlake Drive Medford, NJ 08055	Independence Blue Cross Senior Vice President	Payroll Deduction	$ 115.41
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 923.28		($38.47 bi-weekly)
C. Dibona, G. Fred Jr. 637 Heather Lane Bryn Mawr, Pa 19010	Independence Blue Cross President	Payroll Deduction	$ 403.88
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 3,230.88		($134.62 bi-weekly)
D. Fascia, Robert J. 8 Summer Hill Lane Medford, NJ 08055	Independence Blue Cross Senior Vice President	Payroll Deduction	$ 150.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 1,200.00		($50 bi-weekly)
E. Foos, John G. 1016 Lorien Drive Gwynedd Valley, Pa 19437	Independence Blue Cross Chief Financial Officer	Payroll Deduction	$ 180.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 1,440.00		($60 bi-weekly)
F. Cashman, Christopher 7220 Hicks Road Philadelphia, PA 19128	Independence Blue Cross Sr VP Corp. & Public Affairs	Payroll Deduction	$ 288.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 2,001.00		($86 bi-weekly)
G. Hobson, Michael 31 Oakford Road Wayne, PA 19087	Independence Blue Cross Acct. Exec. KHP East	Payroll Deduction	$ 90.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 720.00		($30 bi-weekly)

SUBTOTAL	of Receipts This Page (optional) >	$ 1,317.27
TOTAL	This Period (last page this line number only) >	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11.a .i.

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. McKeown, Robert A. 608 Bryn Mawr Haddonfield, NJ 08033	Independence Blue Cross Senior Vice President	Payroll Deduction	$ 150.00
Receipt For: Primary General Other (specify):	Aggregate Year-to-Date > $ 1,200.00		($50 bi-weekly)
B. McMillen, Mary Ellen 5487 Grouse Drive Harrisburg, Pa 17111	Independence Blue Cross Vice President	Payroll Deduction	$ 115.50
Receipt For: Primary General Other (specify):	Aggregate Year-to-Date > $ 924.00		($38.50 bi-weekly)
C. Pappalardo, Thomas 240 Tall Pines Drive East Sewell, NJ 08080	Independence Blue Cross Senior Vice President	Payroll Deduction	$ 120.00
Receipt For: Primary General Other (specify):	Aggregate Year-to-Date > $ 960.00		($40 bi-weekly)
D. Pedrioni, Daniel 1504 Schoolhouse Lane Gwynedd Valley, Pa 19437	Independence Blue Cross Senior Vice President	Payroll Deduction	$ 430.00
Receipt For: Primary General Other (specify):	Aggregate Year-to-Date > $ 1,890.00		($90 bi-weekly)
E. Brennan, Martin 1 Tanglewood Circle Rose Valley, PA 19086	Independence Blue Cross Chief Info. Officer	Payroll Deduction	$ 120.00
Receipt For: Primary General Other (specify):	Aggregate Year-to-Date > $ 960.00		($40 bi-weekly)
F. Farley, Kathryn 318 Valley Forge Road Devon, PA 19333	Independence Blue Cross Vice President	Payroll Deduction	$ 105.00
Receipt For: Primary General Other (specify):	Aggregate Year-to-Date > $ 840.00		($35 bi-weekly)
G. Frick, Joseph A. 7 Moore Circle Media, PA 19063	Independence Blue Cross Vice President	Payroll Deduction	$ 120.00
Receipt For: Primary General Other (specify):	Aggregate Year-to-Date > $ 980.00		($40 bi-weekly)

SUBTOTAL of Receipts This Page (optional) > $ 1,160.50

TOTAL This Period (last page this line number only) >

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11.a .i.

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NAME OF COMMITTEE (in Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Green, Michael A. 517 Brights Lane Penrlyn, PA 19422	Independence Blue Cross Vice President	Payroll Deduction	$ 150.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 1200.00		($50 bi-weekly)
B. Zemzow, John 1160 Grandview Terrace Radnor, Pa 19087	Independence Blue Cross Senior Vice President	Payroll Deduction	$ 105.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 840.00		($35 bi-weekly)
C. Lister, Kathleen 2029 Delancey Place Philadelphia, PA 19103	Independence Blue Cross Vice President	Payroll Deduction	$ 150.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 1200.00		($50 bi-weekly)
D. Nolan, Joseph F. 2938 Sunset Avenue Norristown, PA 19403	Independence Blue Cross VP - Controller	Payroll Deduction	$ 90.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 720.00		($30 bi-weekly)
E. Udvarhelyi, Stephen M.D. 1085 Wyndtree Lane Malvern, PA 19355	Independence Blue Cross Sr. VP & Chief Med. Off.	Payroll Deduction	$ 105.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 840.00		($35 bi-weekly)
F. Riggins, Stacy L. 717 W. Fisher Avenue Philadelphia, PA 19120	Independence Blue Cross Retiree Consultant	Payroll Deduction	$ 60.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 480.00		($20 bi-weekly)
G. Barker Charles R. 2073 Valley View Way Lansdale, PA 19446	Independence Blue Cross Senior Director	Payroll Deduction	$ -
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 400.00		($0 bi-weekly)

SUBTOTAL	of Receipts This Page (optional) ..... >	$ 660.00
TOTAL	This Period (last page this line number only) ..... >	

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Boyer, Donna L. 113 Red Stone Ridge Delran, NJ 08075 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Director- Sales Aggregate Year-to-Date > $ 480.00	Payroll Deduction	$ 60.00 ($20 bi-weekly)
B. Brown, Royal E. 1429 S. 15th Street Philadelphia, PA 19146 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Senior Director Aggregate Year-to-Date > $ 480.00	Payroll Deduction	$ 60.00 ($20 bi-weekly)
C. Ciocco, Bonnie 710 Duke Drive Wenonah, NJ 08090 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Director Aggregate Year-to-Date > $ 384.00	Payroll Deduction	$ 48.00 ($16 bi-weekly)
D. Felco, James J. 39 Farmhouse Lane Voorhees, NJ 08043 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Director Aggregate Year-to-Date > $ 480.00	Payroll Deduction	$ 60.00 ($20 bi-weekly)
E. Gregus, Barbara J. 210 Fawn Drive Harleysville, PA 19438 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 480.00	Payroll Deduction	$ 60.00 ($20 bi-weekly)
F. Henry, Joseph P. 237 Leona Avenue Huntington Valley, PA 19006 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Director Aggregate Year-to-Date > $ 432.00	Payroll Deduction	$ 54.00 ($18 bi-weekly)
G. Roberts, Michael Kevin 932 Dogwood Lane Collegeville, PA 19426 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Broker Executive Aggregate Year-to-Date > $ 480.00	Payroll Deduction	$ 60.00 ($20 bi-weekly)

SUBTOTAL of Receipts This Page (optional) ..... > $ 402.00

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

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Douglas, John 105 Cascades Court Blue Bell, PA 19422 Receipt For: Primary General Other (specify):	Independence Blue Cross VP Actuarial Services Aggregate Year-to-Date > $ 480.00	Payroll Deduction	$ 80.00 ($20 bi-weekly)
Eskridge, Karen W. 114A East Providence Road Yeadon, PA 19050 Receipt For: Primary General Other (specify):	Independence Blue Cross Senior Director Aggregate Year-to-Date > $ 384.00	Payroll Deduction	$ 48.00 ($16 bi-weekly)
Haggett, William F. 333 Elm Avenue Haddonfield, NJ 08033 Receipt For: Primary General Other (specify):	Independence Blue Cross Vice President Aggregate Year-to-Date > $ 600.00	Payroll Deduction	$ 75.00 ($25 bi-weekly)
Morris, Edward Jr. 8517 Thomas Mill Terrace Philadelphia, PA 19126 Receipt For: Primary General Other (specify):	Independence Blue Cross Vice President Internal Audit Aggregate Year-to-Date > $ 260.00	Payroll Deduction	$ - ($0 bi-weekly)
Park, Rosemary 219 Carlton Avenue Westmont, NJ 08108 Receipt For: Primary General Other (specify):	Independence Blue Cross Senior Vice President Rating Aggregate Year-to-Date > $ 480.00	Payroll Deduction	$ 80.00 ($20 bi-weekly)
Picciolo, Vincent J. 14 Fisler Drive Clayton, NJ 08312 Receipt For: Primary General Other (specify):	Independence Blue Cross Vice President Aggregate Year-to-Date > $ 432.00	Payroll Deduction	$ 54.00 ($18 bi-weekly)
Hughes, Robert P. 604 Westdale Avenue Swarthmore, PA 19081 Receipt For: Primary General Other (specify):	Independence Blue Cross Senior Director Aggregate Year-to-Date > $ 480.00	Payroll Deduction	$ 80.00 ($20 bi-weekly)

SUBTOTAL of Receipts This Page (optional) ..... > $ 357.00

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

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Pearson MD, Vincent 108 Irick Road Mount Holly, NJ 08060	Independence Blue Cross Medical Director	Payroll Deduction	$ 76.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 600.00		($25 bi-weekly)
Carey, Leo M. 100 Mulberry Lane Media, PA 19063	Independence Blue Cross Vice President	Payroll Deduction	$ 48.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 384.00		($16 bi-weekly)
Hardman, Bruce 154 Quinton-Hancock's Road Salem, NJ 08079	Independence Blue Cross Vice President KHP East	Payroll Deduction	$ 80.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 480.00		($20 bi-weekly)
Picard, Sara B. 160 Fairway Drive Harleysville, PA 19438	Independence Blue Cross Vice President	Payroll Deduction	$ 32.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 384.00		($16 bi-weekly)
Dodd, Denise M. 112 East Madison Avenue Collingswood, NJ 08108	Independence Blue Cross Corp. Research Consultant	Payroll Deduction	$ 36.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 288.00		($12 bi-weekly)
Foster, Franklin 11 New Way Court Willingboro, NJ 08046	Independence Blue Cross Vice President-KHP East	Payroll Deduction	$ 45.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 360.00		($15 bi-weekly)
Freedman, Neal I. 1600 Locust Street #2007 Philadelphia, PA 19102	Independence Blue Cross Associate Actuary	Payroll Deduction	$ 36.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 288.00		($12 bi-weekly)

SUBTOTAL of Receipts This Page (optional) > $ 332.00

TOTAL This Period (last page this line number only) >

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NAME OF COMMITTEE (in Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Helms, Thomas J. 604 Dolores Drive Broomall, PA 19008 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Manage Aggregate Year-to-Date > $ 288.00	Payroll Deduction	$ 36.00 ($12 bi-weekly)
Kearney, Henry M. 4019 K Street Philadelphia, PA 19124 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 312.00	Payroll Deduction	$ 39.00 ($13 bi-weekly)
Keefe, Katherine M. 319 Vassar Ave Swarthmore, PA 19081 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: General Council Aggregate Year-to-Date > $ 336.00	Payroll Deduction	$ 42.00 ($14 bi-weekly)
Matani, Livia 6 Luis Drive Linwood, NJ 08221 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Director Aggregate Year-to-Date > $ 288.00	Payroll Deduction	$ 36.00 ($12 bi-weekly)
Doran, Richard A. 318 S Lawrence Street Philadelphia, PA 19106 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: V.P. Communications Aggregate Year-to-Date > $ 360.00	Payroll Deduction	$ 45.00 ($15 bi-weekly)
Post, R. Scott 285 Stormfield Drive Harleysville, PA 19438 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Senior Director Aggregate Year-to-Date > $ 336.00	Payroll Deduction	$ 42.00 ($14 bi-weekly)
Allen, Patricia 5 McMenamus Drive Belle Mead, NJ 08502 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Manager-Provider Relations Aggregate Year-to-Date > $ 216.00	Payroll Deduction	$ - ($0 bi-weekly)

SUBTOTAL of Receipts This Page (optional) ..... > $ 240.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 9 OF 15

FOR LINE NUMBER 11.a .i.

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NAME OF COMMITTEE (in Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period
A. Lyons M.D., Daniel C. 6 Narcissus Road Sellersville, PA 18960 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Vice President Aggregate Year-to-Date > $ 288.00		$ 36.00 ($12 bi-weekly)
B. Blount, William J. 5911 Upland Way Philadelphia, PA 19131 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Senior Director Aggregate Year-to-Date > $ 288.00		$ 36.00 ($12 bi-weekly)
C. Liskay, Donald J. 2609 Barnes Drive Moon Township, PA 15108 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Vice President Aggregate Year-to-Date > $ 420.00		$ 60.00 ($20 bi-weekly)
D. Landman, Laura 801 Yardley Drive Downingtown, PA 19335 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Director Provider Relations Aggregate Year-to-Date > $ 252.00		$ 36.00 ($12 bi-weekly)
E. Baseman, Isadore R. 221 Stoneway Lane Merion, PA 19066 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 240.00		$ 30.00 ($10 bi-weekly)
F. Borkowski, Kimberly 1101 Bromley Court Bensalem, PA 19020 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 240.00		$ 30.00 ($10 bi-weekly)
G. Brooks, Charlotte Edwards 220 East Mermaid Lane T-125 Philadelphia, PA 19118 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Mgr, Gov't Relations Aggregate Year-to-Date > $ 240.00		$ 30.00 ($10 bi-weekly)

SUBTOTAL of Receipts This Page (optional) ..... > $ 258.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Croner, Robert 1650 Hollyhock Circle Malvern, PA 19355 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)
Dobbins, William G 1128 Fielding Drive West Chester, PA 19382 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Manger Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)
Dooney, Barbara 310 Winding Way King of Prussia, PA 19406 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)
Fody, Kenneth W. 1061 Main Street Red Hill, PA 18076 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)
Gavarone, Nancy 1433 Colonial Drive Bootlwyn, PA 19061 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)
Jones, Kathleen A. 204 N. Merion Avenue Wenonah, NJ 08090 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Director Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)
Kelly, Helen M. 5809 North 4th Road Arlington, VA 22203 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)

SUBTOTAL of Receipts This Page (optional) ..... > $ 210.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11.a .I.

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. McGrath, Joseph E. 8406 Cobden Road Laverock, PA 19118 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Bus. Recovery Admin Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)
B. Pearce, Terry A. 312 William Salesbury Dr. Downington, PA 19335 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Director Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)
C. Perks, Marcy 602 Lennox Court Lansdale, PA 19446 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)
D. Sandlewski, Susan Lipton 117 Andrien Road Glen Mills, PA 19342 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Sr. Benefits Consultant Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)
E. Smith, Kathryn 1228 Banbury Circle West Chester, PA 19380 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)
F. Tolles, Laura D 1306 Robert's Way Voorhees, PA 08043 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Business Analyst Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)
G. Truaman, Mary C. 1525 Brian Drive West Chester, PA 19380 Receipt For: Primary General Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)

SUBTOTAL	of Receipts This Page (optional) ..... >	$ 210.00
TOTAL	This Period (last page this line number only) ..... >	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11.a .1

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Zellers, William B. 226 Windsor Way Doylestown, PA 18901 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)
B. Marshall, Lorina L. 4000 Gypsy Lane, Apt 700 Philadelphia, PA 19144 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Vice President Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)
C. Mayfield Jr., Robert 201 Hedgemere Drive Devon, PA 19333 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Vice President Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)
D. Neeson, Richard J. 808 Longchamps Drive Devon, PA 19333 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: President & COO, GCC Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)
E. Reilley, Lawrence 1304 Fairbourne Ct Lansdale, PA 19446 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Vice President Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)
F. Adamczyk, Stan C. 265 Scott Road Perkasie, PA 18944 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Director Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)
G. Hughes, Anne Muldoon 2536 Rosemont Avenue Ardmore, PA 19003 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Independence Blue Cross Occupation: Manager Aggregate Year-to-Date > $ 240.00	Payroll Deduction	$ 30.00 ($10 bi-weekly)

SUBTOTAL of Receipts This Page (optional) ..... > $ 210.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11.a .i.

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code Strollo, Mark 118 North Van Pelt Street Philadelphia, PA 19103	Name of Employer Independence Blue Cross Occupation Director-Pharmacy Services	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 30.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 240.00		($10 bi-weekly)
B. Full Name, Mailing Address and ZIP Code Brown-Blau, Wendy 4170 Shawmont Avenue Philadelphia, PA 19128	Name of Employer Independence Blue Cross Occupation Supervisor	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 30.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 240.00		($10 bi-weekly)
C. Full Name, Mailing Address and ZIP Code Adams, Robert Mark 813 Penllyn Pike Lumber, PA 19002	Name of Employer Independence Blue Cross Occupation Director	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 30.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 210.00		($10 bi-weekly)
D. Full Name, Mailing Address and ZIP Code Barnes, Richard A. 8990 Drive Road Philadelphia, PA 19115	Name of Employer Independence Blue Cross Occupation Manager of CSI	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 30.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 210.00		($10 bi-weekly)
E. Full Name, Mailing Address and ZIP Code Seckinger, Carol A. 6017 Jackson Street Pittsburgh, PA 15208	Name of Employer Independence Blue Cross Occupation Director of Medical Research	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 30.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 210.00		($10 bi-weekly)
F. Full Name, Mailing Address and ZIP Code Herzer, Lee L. 4 Surrey Road Voorhees, NJ 08043	Name of Employer Independence Blue Cross Occupation Manager of CSI-Phila	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 30.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 210.00		($10 bi-weekly)
G. Full Name, Mailing Address and ZIP Code Tighe, Lynn M. 2907 Tambrook Drive Mt. Laurel, NJ 08054	Name of Employer Independence Blue Cross Occupation Manager Customer Service	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ 30.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 210.00		($10 bi-weekly)

SUBTOTAL of Receipts This Page (optional) ..... > $ 200.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11.a .I.

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code Raczkowski, A RR #2, Box 281 Hunlock Creek, PA 18621 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Northeastern Blue Cross Occupation: Medicare Sales Rep Aggregate Year-to-Date > $	230.00	$ 30.00 ($10 bi-weekly)
B. Full Name, Mailing Address and ZIP Code Leberknight, Mary L 708 Sunhaven Circle Mechanicsburg, PA 17055 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Capital Blue Cross Occupation: Manager Corporate Planning Aggregate Year-to-Date > $	230.00	$ 30.00 ($10 bi-weekly)
C. Full Name, Mailing Address and ZIP Code Markel, Robert 521 9th Street New Cumberland, PA 17070 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Capital Blue Cross Occupation: SR V.P. and Treasurer Aggregate Year-to-Date > $	700.00	$ 120.00 ($40 bi-weekly)
D. Full Name, Mailing Address and ZIP Code McGinley, Michael 211 Indian Creek Drive Mechanicsburg, PA 17055 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Senior Vice President Occupation: Director Provider Relations Aggregate Year-to-Date > $	290.00	$ 45.00 ($15 bi-weekly)
E. Full Name, Mailing Address and ZIP Code Mead, James 201 Hearth Road Camp Hill, PA 17011 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Capital Blue Cross Occupation: President Aggregate Year-to-Date > $	930.00	$ 150.00 ($50 bi-weekly)
F. Full Name, Mailing Address and ZIP Code Vanvelkenburg, Lee 2901 Rathlon Road Camp Hill, PA 17011 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Capital Blue Cross Occupation: Vice President-Corp Services Aggregate Year-to-Date > $	422.00	$ 60.00 ($20 bi-weekly)
G. Full Name, Mailing Address and ZIP Code Carocci, Vincent 813 Mandy Lane Camp Hill, PA 17011 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Capital Blue Cross Occupation: Mgr. Gov't Relations Aggregate Year-to-Date > $	460.00	$ 60.00 ($20 bi-weekly)

SUBTOTAL	of Receipts This Page (optional) ..... >	$ 495.00
TOTAL	This Period (last page this line number only) ..... >	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11.a .i.

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Brown, Mark 50 N 30th Street Camp Hill, PA 17011	Capital Blue Cross Salesperson	Payroll Deduction	$ 30.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 230.00		($10 bi-weekly)
B. Osciowski, Fran 4006 Green Street Harrisburg, PA 1711	Capital Blue Cross Executive Director CBI	Payroll Deduction	$ 30.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 230.00		($10 bi-weekly)
C. Jackson, Neil 4 Dulles Drive West Camp Hill, PA 17011	Capital Blue Cross Supervisor	Payroll Deduction	$ 30.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 230.00		($10 bi-weekly)
D. Hilderhoff, William 3971 Brookridge Road Mechanicburg, PA 17055	Capital Blue Cross Director Systems	Payroll Deduction	$ 30.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 230.00		($10 bi-weekly)
E. Spleth, Gregg 1708 Wyoming Avenue Forty Fort, PA 18704	Northeastern Blue Cross Corp. Director, MA	Payroll Deduction	$ 45.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 255.00		($15 bi-weekly)
F. Phelps, W.J. 9 Deer Meadow Drive Dallas, PA 18612	Northeastern Blue Cross Vice President	Payroll Deduction	$ 45.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 270.00		($15 bi-weekly)
G. Campbell, R.J. 11 The Marshes Danbury, MA 02332	Northeastern Blue Cross Vice President	Payroll Deduction	$ 45.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 345.00		($15 bi-weekly)

SUBTOTAL	of Receipts This Page (optional) >	$ 255.00
TOTAL	This Period (last page this line number only) >	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11.a .i

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period
Ward, T.J. 503 Clark Avenue Clarks Summit, PA 18411 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Northeastern Blue Cross President, CEO Aggregate Year-to-Date > $ 278.00		$ 36.00 ($12 bi-weekly)
Gardner, J. 1148 University Drive Yardley, PA 19067 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Northeastern Blue Cross Vice President Aggregate Year-to-Date > $ 280.00		$ 30.00 ($10 bi-weekly)
Guarilia, G.M. 80 Foote Avenue Duryea, PA 18642 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Northeastern Blue Cross Legislative Liason Aggregate Year-to-Date > $ 230.00		$ 30.00 ($10 bi-weekly)
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Northeastern Blue Cross Medicare Sales Rep Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $		

SUBTOTAL	of Receipts This Page (optional) ..... >	$ 96.00
TOTAL	This Period (last page this line number only) ..... >	$ 6,402.77

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 16

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ -
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $	0.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ -
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $	0.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ -
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $	0.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ -
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $	0.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ -
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $	0.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period $ -
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $	0.00	

SUBTOTAL	of Receipts This Page (optional) ..... >	$ -
TOTAL	This Period (last page this line number only) ..... >	-

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
			FOR LINE NUMBER 2 2

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BLUE PAC 1310 "G" Street Washington, DC 20005	Contribution - State, Pa Disbursement for: Primary General Other (specify)	11/19/98	$1,500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) >	$1,500.00
TOTAL This Period (last page this line number only) >	$1,500.00

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1 FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for Arlen Specter 111 S. 15th Street, 21st Floor Philadelphia, PA 19102	Contribution - Senate Disbursement for: Primary General Other (specify)	10/13/98	($500.00) (check returned)
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	($500.00)
TOTAL This Period (last page this line number only)	($500.00)

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 2
			FOR LINE NUMBER 2 8

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Bob Mellow 524 Main Street Pedoville, PA 15452	Contribution - State, Pa Disbursement for: Primary General Other (specify)	10/22/98	$1,000.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Committee to Elect Shirley Kitchen 1515 S. Cameron Terrace Harrisburg, PA 17104	Contribution - State, Pa Disbursement for: Primary General Other (specify)	11/19/98	$250.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Matt Ryan P.O. Box 677 Harrisburg, PA 17108-0677	Contribution - State, Pa Disbursement for: Primary General Other (specify)	10/27/98	$500.00
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Republican Leaders-Pa House of Rep P.O. Box 11797 Harrisburg, PA 17108	Contribution - State, Pa Disbursement for: Primary General Other (specify)	10/27/98	$3,500.00
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Upper Darby Republican Campaign Comm 5035 Township Line Road Drexel Hill, PA 19016	Contribution - State, Pa Disbursement for: Primary General Other (specify)	10/27/98	$500.00
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Upper Darby Repub. Campaign Comm. 5035 Township Line Road Drexel Hill, PA 19016	Contribution - State, Pa Disbursement for: Primary General Other (specify)	10/27/98	$200.00
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Schnider Cantano Campaign Hispanic Committee P.O. Box 7780, Christian Sted St. Croix, US, VI 00823	Contribution - State, Pa Disbursement for: Primary General Other (specify)	10/30/98	$1,000.00
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Nick Micozzie P.O. Box 234 Clifton Heights, PA 19108	Contribution - State, Pa Disbursement for: Primary General Other (specify)	11/19/98	$200.00
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Denny O'Brien P.O. Box 22433 Philadelphia, PA 19110-2433	Contribution - State, Pa Disbursement for: Primary General Other (specify)	11/19/98	$250.00

SUBTOTAL of Disbursements This Page (optional) >	$7,400.00
TOTAL This Period (last page this line number only) >	

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 2 OF 2 FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

> BluePAC Pennsylvania Blue Cross Plans PAC

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Democratic State Senate Campaign Committee P.O. Box 3792 Harrisburg, PA 17105	Contribution - State, Pa Disbursement for: Primary General Other (specify)	11/19/98	$500.00
B. Full Name, Mailing Address and ZIP Code Delaware County Republican Finance Committee 323 West Front Street Media, PA 19063	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	11/19/98	$300.00
C. Full Name, Mailing Address and ZIP Code Friends of Jamie McDermott P.O. Box 22493 Philadelphia, PA 19110-2433	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	11/19/98	$200.00
D. Full Name, Mailing Address and ZIP Code Republican City Committee 1164 Norwalk Road Philadelphia, PA 19115	Purpose of Disbursement Contribution - State, Pa Disbursement for: Primary General Other (specify)	11/19/98	$200.00
E. Full Name, Mailing Address and ZIP Code unitemized	Purpose of Disbursement Disbursement for: Primary General Other (specify)	various	$400.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) >	$1,600.00
TOTAL This Period (last page this line number only) >	$9,000.00

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☑	Hand Delivered	Date of Receipt 12/3/98
☐	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

DY
PREPARER

12/3/98
DATE PREPARED

(4/98)