

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


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

|  |  |  |  |  |  | Fffice <br> Use <br> Only |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |

FEC Form 3X (Rev. 05/2016)

## Write or Type Committee Name <br> Blue Cross Blue Shield of Alabama PAC



| COLUMN A | COLUMN B |
| :---: | :---: |
| This Period | Calendar Year-to-Date |

6. (a) Cash on Hand January 1,

| Y-Y |
| :---: |
| 2016 |

$\square, 153899.48$
(b) Cash on Hand at

Beginning of Reporting Period............


$\square, 61725.92$
(d) Subtotal (add Lines 6(b) and

6(c) for Column A and Lines
6(a) and 6(c) for Column B) $\qquad$

7. Total Disbursements (from Line 31) $\qquad$



9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D) $\qquad$
0.00
10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D) $\qquad$
0.00
$x$
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

Write or Type Committee Name
Blue Cross Blue Shield of Alabama PAC

11. Contributions (other than loans) From:
(a) Individuals/Persons Other

Than Political Committees
(i) Itemized (use Schedule A)............

|  |  | 7325.36 |
| :---: | :---: | :---: |
|  |  | 103.00 |
|  |  |  |
|  |  | 7428.36 |
|  |  | 0.00 |


|  |  | 54624.22 |
| :---: | :---: | :---: |
|  | , | 7101.70 |
|  | , | 61725.92 |
|  | , | 0.00 |
|  |  | 0.00 |

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)


|  | 61725.92 |
| :---: | :---: |
|  | 0.00 |
|  | $0.00$ |
|  | $0.00$ |
|  | $0.00$ |

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees. $\qquad$
17. Other Federal Receipts
(Dividends, Interest, etc.) $\qquad$
18. Transfers from Non-Federal and Levin Funds
(a) Non-Federal Account
(from Schedule H3)...........................
(b) Levin Funds (from Schedule H5) .........
(c) Total Transfers (add 18(a) and 18(b))..

|  | 0.00 |  |
| :---: | :---: | :---: |
|  | , | 0.00 |
|  | , | 0.00 |

19. Total Receipts (add Lines 11(d), $12,13,14,15,16,17$, and 18(c)) .........
$\square \rightarrow \quad 7428.36$
$\square \quad 61725.92$
20. Total Federal Receipts
(subtract Line 18(c) from Line 19) ......... $\downarrow$ $\square$

FEC Form 3X (Rev. 05/2016)

## II. Disbursements

21. Operating Expenditures:
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)
(i) Federal Share $\qquad$
$\qquad$
(ii) Non-Federal Share. $\qquad$
(b) Other Federal Operating Expenditures $\qquad$
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))
22. Transfers to Affiliated/Other Party Committees.
23. Contributions to Federal Candidates/Committees and Other Political Committees.
24. Independent Expenditures (use Schedule E)
25. Coordinated Party Expenditures
(52 U.S.C. § 30116(d))
(use Schedule F). $\qquad$
26. Loan Repayments Made $\qquad$
27. Loans Made
28. Refunds of Contributions To:
(a) Individuals/Persons Other

Than Political Committees $\qquad$
(b) Political Party Committees $\qquad$
(c) Other Political Committees (such as PACs).
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) $\qquad$
$\qquad$
29. Other Disbursements (Including Non-Federal Donations) $\qquad$
0.00

COLUMN A Total This Period


0.00

| 0 | 0.00 |
| :--- | :--- | :--- |
| $g$ | 0.00 |

0.00
0.00

| 0, | 0.00 |
| :--- | :--- | :--- |
| $, \quad, \quad 0.00$ |  |


30. Federal Election Activity (52 U.S.C. § 30101(20))
(a) Allocated Federal Election Activity (from Schedule H6)
$\qquad$
(ii) "Levin" Share.
(b) Federal Election Activity Paid Entirely With Federal Funds $\qquad$
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).

|  | 0.00 |  |
| :---: | :---: | :---: |
| $\Rightarrow$, | 0.00 |  |
| $\Rightarrow$, | 0.00 |  |
|  |  | 0.00 |


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

32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31). $\qquad$
$\square$

| , 0.00 |
| :---: |
| 0.00 |
| $0.00$ |
| 0.00 |
| $\text { , } 12000.00$ |
| $54000.00$ |
| $0,0,00$ |
| , 9 , 0.00 |
| - 9, 0.00 |
| $0.00$ |
| 0.00 |
| $0.00$ |
| $0.00$ |
| - 0.00 |

0.00

COLUMN B Calendar Year-to-Date

Page 5
FEC Form 3X (Rev. 05/2016)
III. Net Contributions/
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)) ......... $\downarrow$
37. Offsets to Operating Expenditures (from Line 15, page 3) $\qquad$
38. Net Operating Expenditures (subtract Line 37 from Line 36) $\qquad$

COLUMN A
Total This Period

COLUMN B Calendar Year-to-Date



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

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

FOR LINE NUMBER: $\quad$ PAGE 6 OF 26 (check only one)


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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Echols, Molly, B, ,

Mailing Address 2 North Jackson St

| Mailing Address 2 North Jackson St |  |  |
| :---: | :---: | :---: |
| City <br> Montgomery | State <br> AL | $\begin{gathered} \hline \text { Zip Code } \\ 36104 \end{gathered}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS of AL |  | ion (for Individual) Internal Audit |
|  | Aggreg |  |

Date of Receipt


Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$16.06 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Velezis, Michael, J., ,

Mailing Address 450 Riverchase Parkway East

| City <br> Birmingham | State <br> AL | Zip Code <br> 35244 |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS AL | Occupation (for Individual) <br> VP Legal Services |  |
| Receipt For:  <br> $\square$ Primary $\quad \square$ General <br> $\square$ Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR125562725300
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Jarrett, Angela, D, ,

Mailing Address 2 North Jackson Street Suite 202

| City <br> Montgomery | State <br> AL | Zip Code <br> 36104 |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) |  |  |
| BLUPAC | Occupation (for Individual) <br> Receipt For: <br> Primary Claims \& Benefit Admin <br> Other (specify) | Aggregate Year-to-Date $\mathbf{V}$ |

Date of Receipt


Transaction ID : PR130963525300
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)............................................................... | $464.84$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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

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

FOR LINE NUMBER: PAGE 7 OF 26 (check only one)


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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Weaver, Darrel, Craig,,

Mailing Address 450 Riverchase Parkway East

| Mailing Address 450 Riverchase Parkway East |
| :--- |
| City <br> Birmingham |
| FEC ID number of contributing <br> federal political committee. |
| Name of Employer (for Individual) <br> AL |
| BLUPAC |
| Receipt For: <br> $\square$ <br> Primary $\quad \square$ <br> Other (specify) $\boldsymbol{\nabla}$ |

Date of Receipt


Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Keown, Kipp, D, ,

Mailing Address 450 Riverchase Parkway East

| City <br> Birmingham | State <br> AL | $\begin{array}{\|c\|} \hline \text { Zip Code } \\ 35244 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BLUPAC |  | ion (for Individual) keting |
| $\begin{aligned} & \text { Receipt For: } \\ & \square \text { Primary } \quad \square \text { General } \\ & \square \text { Other (specify) } \end{aligned}$ | Aggrega |  |

Date of Receipt


Transaction ID : PR132319725300
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Orr, Robert, R,

Mailing Address 1905 Balfour Dr

| City <br> Birmingham |
| :--- |
| FEC ID number of contributing <br> federal political committee. |
| AL |
| Name of Employer (for Individual) <br> BCBS Alabama |
| Receipt For: <br> $\square$ Primary $\quad \square$ <br> Other (specify) |
| General |

Date of Receipt


Transaction ID : PR78822925300
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................. | , 624.99 |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | , - , - - - . |

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

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

FOR LINE NUMBER: PAGE 8 OF 26 (check only one)


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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Vines, Timothy, , ,

Mailing Address 717 Savannah PI

| Mailing Address 717 Savannah PI |  |  |
| :---: | :---: | :---: |
| City <br> Birmingham | State <br> AL | $\begin{aligned} & \hline \text { Zip Code } \\ & 35226-3262 \end{aligned}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | (for Individual) dministrative Officer |
| Receipt For: Primary General Other (specify) | Aggreg | -to-Date <br> 1874.97 |

Date of Receipt

| $\begin{gathered} \mathrm{M} \mathrm{M}^{\prime} \\ 09 \end{gathered}$ | $\begin{gathered} D \quad D \\ 30 \end{gathered}$ | $\begin{gathered} y-y \\ 2016 \end{gathered}$ |
| :---: | :---: | :---: |

Transaction ID : PR78823025300
Amount of Each Receipt this Period
$\square 208.33$

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Barth, John, Walter, ,

Mailing Address 212 Erwin Cir

| City <br> Birmingham | State <br> AL | Zip Code <br> $35216-1718$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) |  |  |
| BCBS Alabama |  |  | | Receipt For: |
| :--- |
| $\square$Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ |

Date of Receipt


Transaction ID : PR78825325300
Amount of Each Receipt this Period
$\square$, 40.71

## Memo Item

P/R Deduction (\$13.57 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Berkery, Jonathan, T, ,

Mailing Address 703 Morris Blvd

| City <br> Birmingham |
| :--- |
| FEC ID number of contributing <br> AL Zip Code <br> $35209-6223$ <br> federal political committee.  |
| Name of Employer (for Individual) <br> BCBS Alabama |
| Receipt For: <br> $\square$ Primary $\square$ General <br> Other (specify) |

Date of Receipt


Transaction ID : PR78825425300
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$15.46 Bi-Weekly)


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

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

FOR LINE NUMBER: PAGE 9 OF 26 (check only one)


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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

| Mailing Address 226 Cambo Ter |  |  |
| :---: | :---: | :---: |
| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35226-1078 \end{array}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) <br> Dept Mgr Enrollment Services |  |
| Receipt For: Primary General Other (specify) | Aggrega | ar-to-Date $400.00$ |

Date of Receipt

| 09 | $\begin{gathered} D \quad D \\ 30 \end{gathered}$ | $2016$ |
| :---: | :---: | :---: |

Transaction ID : PR78825525300
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Briggs, Dick, Dowling, ,

Mailing Address 4327 Kennesaw Dr

| City <br> Birmingham | State <br> AL | Zip Code <br> $35213-3311$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama | Occupation (for Individual) <br> Chief Business Officer |  |
| Receipt For: <br> $\square$ <br> Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78825825300
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

## Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Bruner, William, G, ,

Mailing Address 812 Hickory Trace Cir

| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35244-4545 \\ \hline \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) District Manager |  |
| Receipt For: Primary General Other (specify) | Aggreg | r-to-Date $341.20$ |

Date of Receipt


Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$17.06 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $319.51$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | - |

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

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

FOR LINE NUMBER: PAGE 10 OF 26 (check only one)


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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

| Mailing Address 3713 Tudor Ln |  |  |
| :---: | :---: | :---: |
| City Mobile | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 36608-1526 \end{array}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Account Executive |  |
| Receipt For:$\square$Primary $\quad \square$ General <br> $\square$ | Aggrega | r-to-Date $494.80$ |

Date of Receipt


Transaction ID : PR78826225300
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$24.74 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Carden, Noel, W, ,

Mailing Address 5783 Cypress Trce

| City <br> Birmingham | State <br> AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35244-5481 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) VP and Chief Actuary |  |
|  | Aggrega |  |

Date of Receipt


Transaction ID : PR78826325300
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Carter, Tony, H, ,

Mailing Address 156 Stonegate Dr

| City Birmingham | State <br> AL | Zip Code 35242-7054 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) VP Consumer Insurance Sales |  |
|  | Aggreg | r-to-Date $1874.97$ |

Date of Receipt


Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)............................................................... | $490.88$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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

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

FOR LINE NUMBER: PAGE 11 OF 26 (check only one)


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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

| Mailing Address 919 38th St S |  |  |
| :---: | :---: | :---: |
| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35222-3602 \end{array}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) SVP \& Chief Marketing Officer |  |
| Receipt For: Primary General Other (specify) | Aggrega | -to-Date $1874.97$ |

Date of Receipt
Mailing Address 919 38th St S

| $\begin{gathered} M \\ 09 \end{gathered}$ | $\begin{gathered} D \quad D \\ 30 \end{gathered}$ | $\begin{aligned} & y=r \\ & 2016 \end{aligned}$ |
| :---: | :---: | :---: |

Transaction ID : PR78826925300
Amount of Each Receipt this Period
$\square 208.33$

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DeCroes, Charles, B, ,

Mailing Address 1392 Belmont Ln

| City <br> Helena | State <br> AL | Zip Code <br> $35080-4004$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> $\square$Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78827125300
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Dinsmore, William, A, ,

Mailing Address 1921 Forest Knoll Dr

| City Birmingham | State AL | Zip Code 35244-1431 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. |  |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Manager Database Admin |  |
|  | Aggreg | r-to-Date $300.00$ |

Date of Receipt


Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$15.00 Bi-Weekly)


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

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

FOR LINE NUMBER: PAGE 12 OF 26 (check only one)


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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Dunsmore, Joseph, Edward, ,

Mailing Address 4474 Heritage Park Dr

| City <br> Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35226-4171 \end{array}$ | Transaction ID : PR78827625300 |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | Amount of Each Receipt this Period |  |  |
| FEC ID number of contributing federal political committee. | C |  |  | - | - 208.33 |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) VP Application Development |  | Memo Item |  |  |
| Receipt For: Primary General Other (specify) | , 1874.97 |  | P/R Deduction (\$208.33 Monthly) |  |  |

Date of Receipt

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Edwards, Brian, D, ,

Mailing Address 107 Eagle Cove Dr

| City <br> Pelham | State <br> AL | Zip Code <br> $35124-2223$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. |  |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78827725300
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Finley, Shirley, H, ,

Mailing Address 4221 Waterford Ln

| City <br> Trussville | State <br> AL | Zip Code <br> 35173-1567 |
| :--- | :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama | Occupation (for Individual) <br> Health Management Dept Mgr |  |
| Receipt For: <br> $\square$ <br> Primary $\square$ General <br> Other (specify) | Aggregate Year-to-Date $\nabla$ |  |

Date of Receipt


Transaction ID : PR78828025300
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$16.47 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $466.07$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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

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

FOR LINE NUMBER: PAGE 13 OF

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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

| Mailing Address PO Box 361343 |  |  |
| :---: | :---: | :---: |
| City <br> Birmingham | State <br> AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35236-1343 \end{array}$ |
| FEC ID number of contributing federal political committee. | $\mathrm{C}$ |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) Associate Services |
|  | Aggreg | r-to-Date <br> 361.60 |

Date of Receipt


Transaction ID : PR78828425300
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$18.08 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Harris, Edward, O, ,

Mailing Address 3325 Brook Highland Cir

| City <br> Birmingham | State <br> AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35242-5816 \\ \hline \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) ness Development |
|  | Aggreg |  |

Date of Receipt


Transaction ID : PR78828525300
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Harrison, Harold, Wayne, ,

Mailing Address 1104 Walnut Cir

| City <br> Alabaster | State <br> AL | Zip Code <br> $35007-9300$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) | Occupation (for Individual) <br> Dept Mgr Health Care Networks |  |
| RCBS Alabama  <br> Receipt For:  <br> Primary <br> Other (specify) Aggregate Year-to-Date $\boldsymbol{\nabla}$ |  |  |

Date of Receipt


Transaction ID : PR78828625300
Amount of Each Receipt this Period
$\square, 50.67$
$\square$ Memo Item

P/R Deduction (\$16.89 Bi-Weekly)


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

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

FOR LINE NUMBER: PAGE 14 OF
26 (check only one)


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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Heaton, Sharon, Rothe,

Mailing Address 2605 Old Woodstock TrI

| Mailing Address 2605 Old Woodstock Trl |  |  |
| :---: | :---: | :---: |
| City Birmingham | State <br> AL | $\begin{aligned} & \hline \text { Zip Code } \\ & 35216-5807 \end{aligned}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | on (for Individual) Claims Processing |
|  | Aggrega |  |

Date of Receipt

| $\begin{gathered} \mathrm{M} \mathrm{M}^{\prime} \\ 09 \end{gathered}$ | $\begin{gathered} D \quad D \\ 30 \end{gathered}$ | $\begin{gathered} y-y \\ 2016 \end{gathered}$ |
| :---: | :---: | :---: |

Transaction ID : PR78828825300
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Herringdon, Sheila, P,

Mailing Address 304 fox valley highlands cr

| City | State | Zip Code |
| :---: | :---: | :---: |
| Maylene | AL | 35114 |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | tion (for Individual) lity Mngmnt Plan Perfor |
|  | Aggrega |  |

Date of Receipt


Transaction ID : PR78829025300
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

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

Mailing Address 4008 Charring Cross Ln

| City Birmingham | State <br> AL | Zip Code 35226-2092 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | $\mathrm{C}$ |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) SVP Health Care Networks |  |
|  | Aggrega | r-to-Date <br> 1874.97 |

Date of Receipt


Transaction ID : PR78829225300
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................ $\downarrow$ | $319.69$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)........................................................ |  |

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

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

FOR LINE NUMBER: PAGE 15 OF (check only one)


Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.
name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Johnson, David, C, ,

Mailing Address 2508 wilowbrook cr

| Mailing Address 2508 wilowbrook cr |  |
| :---: | :---: |
| City <br> Birmingham | State Zip Code <br> AL 35242 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) <br> Strategy Consult Technical Adv |
|  | Aggregate Year-to-Date |

Date of Receipt


Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Kellogg, Terry, D, ,

Mailing Address 1230 Glen View Rd

| City <br> Birmingham | State <br> AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35222-4317 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) President and CEO |  |
|  | Aggrega |  |

Date of Receipt


Transaction ID : PR78829625300
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Kohn, Francis, Hill, ,

Mailing Address 2226 English Village Ln

| City Birmingham | State AL | Zip Code 35223-1731 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Account Executive |  |
|  | Aggreg | $\begin{aligned} & \text { rr-to-Date } \boldsymbol{\nabla} \\ & 426.20 \end{aligned}$ |

Date of Receipt


Transaction ID : PR78830125300
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$21.31 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)............................................................... | $326.26$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | , |

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

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

FOR LINE NUMBER: PAGE 16 OF 26 (check only one)


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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

| Mailing Address 2616 greenmont cr |  |  |
| :---: | :---: | :---: |
| City Birmingham | State AL | $\begin{gathered} \text { Zip Code } \\ 35226 \end{gathered}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) BESt Execution, Dept Mgr |  |
|  | Aggreg | r-to-Date $350.40$ |

Date of Receipt


Transaction ID : PR78830225300
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$17.52 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. LeMier, Sherrie, D, ,

Mailing Address 2448 Lancaster Cir

| City <br> Birmingham | State <br> AL | Zip Code <br> $35242-4420$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> $\square$ <br> Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78830325300
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Lyda, John, B, ,

Mailing Address 3484 Tamassee Ln

| City <br> Birmingham | State <br> AL | Zip Code <br> $35226-2671$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) | Occupation (for Individual) <br> MCBS Alabama |  |
| Receipt For:  <br> Primary <br> Other (specify) Aggregate Year-to-Date $\boldsymbol{V}$ |  |  |

Date of Receipt


Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$15.00 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)............................................................... | $305.89$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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

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

FOR LINE NUMBER: PAGE 17 OF 26 (check only one)


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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Mackin, Carol, D,

Mailing Address 809 Royal Ter

| Mailing Address 809 Royal Ter |
| :--- |
| City <br> Birmingham |
| FEC ID number of contributing <br> federal political committee. |
| Name of Employer (for Individual) <br> AL |
| BCBS Alabama |
| Receipt For: <br> $\square$ <br> Primary Code <br> Other (specify) $\boldsymbol{\nabla}$ |
| General |

Date of Receipt

| $\begin{gathered} \mathrm{M} \mathrm{M}^{\prime} \\ 09 \end{gathered}$ | $\begin{gathered} D \quad D \\ 30 \end{gathered}$ | $\begin{gathered} y-y \\ 2016 \end{gathered}$ |
| :---: | :---: | :---: |

Transaction ID : PR78830725300
Amount of Each Receipt this Period
$\square 208.33$

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. McIntyre, Douglas, E, ,

Mailing Address 3489 Birchwood Ln

| City <br> Birmingham | State <br> AL | Zip Code <br> $35243-4434$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> Primary <br> Other (specify) $\boldsymbol{V}$ | General <br> VP Healthcare Network Contract |  |

Date of Receipt


Transaction ID : PR78830925300
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Moor, John, Matthew, , |  |  | Date of Receipt |
| :---: | :---: | :---: | :---: |
| Mailing Address 18 Montcrest Dr |  |  |  |
| City | State AL | Zip Code |  |
| Birmingham |  | 35213-3022 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. |  |  | $208.33$ |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) | Memo Item <br> P/R Deduction (\$208.33 Monthly) |
|  | Aggrega | r-to-Date $\boldsymbol{\nabla}$  <br>   |  |
| SUBTOTAL of Receipts This Page (optional) |  |  | , $\quad 624.99$ |
| TOTAL This Period (last page this line number only)........................................................... |  |  |  |

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

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

FOR LINE NUMBER: PAGE 18 OF

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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Morris, Joe, S, ,

Mailing Address 908 Lakeview Estates Dr

| City <br> Bessemer | State <br> AL | Zip Code <br> $35023-5810$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) |  |  |
| BCBS Alabama |  |  |
| Receipt For: <br> Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{\nabla}$ | Occupation (for Individual) <br> Director Facilities Operations |  |

Date of Receipt


Transaction ID : PR78831525300
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Morrissette, John, M, ,

Mailing Address 1515 Amherst Cir

| City <br> Birmingham | State <br> AL | Zip Code <br> $35216-1009$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. |  |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> $\square$ <br> Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78831625300
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$25.00 Bi-Weekly)


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

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

FOR LINE NUMBER: PAGE 19 OF

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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

| Mailing Address 101 Creekwood Ln |  |
| :---: | :---: |
| City Helena | State Zip Code <br> AL $35080-3273$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Director Info Security/CISO |
|  | Aggregate Year-to-Date $\square$ <br> 400.00 |

Date of Receipt

| M 09 | $\begin{gathered} D \quad D \\ 30 \end{gathered}$ | $2016$ |
| :---: | :---: | :---: |

Transaction ID : PR78831925300
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Patterson, Michael, L, ,

Mailing Address 1809 Lucinda Robey PI

| City <br> Birmingham | State <br> AL | Zip Code <br> $35211-3872$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) |  |  |
| BCBS Alabama |  |  | | Receipt For: |
| :--- |
| Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ |

Date of Receipt


Transaction ID : PR78832025300
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

## Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Platt, David, E, ,

Mailing Address 3700 Montevallo Rd S

| City <br> Birmingham | State <br> AL | Zip Code <br> $35213-4208$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) | Occupation (for Individual) <br> Mgr Account Executive Program |  |
| RCBS Alabama  <br> Receipt For:  <br> Primary <br> Other (specify) Aggregate Year-to-Date $\mathbf{V}$ |  |  |

Date of Receipt


Transaction ID : PR78832125300
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$24.42 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)............................................................... | $341.59$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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

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

FOR LINE NUMBER: PAGE 20 OF
26 (check only one)


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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Rumph, Sandra, B, ,

Mailing Address 5448 Scout Creek Dr

| Mailing Address 5448 Scout Creek Dr |  |
| :---: | :---: |
| City <br> Birmingham | State Zip Code <br> AL $35244-3936$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Health Management Dept Mgr |
|  | Aggregate Year-to-Date $\square$ |

Date of Receipt

| $\begin{gathered} \mathrm{M} \mathrm{M}^{\prime} \\ 09 \end{gathered}$ | $\begin{gathered} D \quad D \\ 30 \end{gathered}$ | $\begin{gathered} y-y \\ 2016 \end{gathered}$ |
| :---: | :---: | :---: |

Transaction ID : PR78832325300
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Saxon, Vickie, L, ,

Mailing Address 4127 Heatherhedge Ln

| $\overline{\text { City }}$ | State | Zip Code |
| :---: | :---: | :---: |
| Birmingham | AL | 35226-2095 |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | tion (for Individual) nterprise Resources |
|  | Aggregat |  |

Date of Receipt


Transaction ID : PR78832725300
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Sellers, Bobby, Ray, ,

Mailing Address 319 Chestnut Ln

| City <br> Alabaster |
| :--- |
| FEC ID number of contributing <br> federal political committee. |
| AL |
| Name of Employer (for Individual) <br> BCBS Alabama |
| Receipt For: <br> $\square$ Primary $\quad \square$ General <br> Other (specify) |

Date of Receipt


Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$23.74 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)................................................................. | $344.38$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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

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

FOR LINE NUMBER: PAGE 21 OF 26 (check only one)


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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Smith, Mary, C, ,

Mailing Address 5440 Magnolia Trce

| Mailing Address 5440 Magnolia Trce |  |  |
| :---: | :---: | :---: |
| City Birmingham | State <br> AL | $\begin{aligned} & \hline \text { Zip Code } \\ & 35244-4533 \end{aligned}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Director Treasury Operations |  |
|  | Aggreg |  |

Date of Receipt

| $\begin{gathered} \mathrm{M} \mathrm{M}^{\prime} \\ 09 \end{gathered}$ | $\begin{gathered} D \quad D \\ 30 \end{gathered}$ | $\begin{gathered} y-y \\ 2016 \end{gathered}$ |
| :---: | :---: | :---: |

Transaction ID : PR78833225300
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Steed, Clay, T, ,

Mailing Address 334 Lennox Sq

| City <br> Fairhope | State <br> AL | Zip Code <br> $36532-7519$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) |  |  |
| BCBS Alabama |  |  | | Receipt For: |
| :--- |
| $\square$Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ |

Date of Receipt


Transaction ID : PR78833325300
Amount of Each Receipt this Period
$\square$, 42.21

## Memo Item

P/R Deduction (\$14.07 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Stone, Joseph, Robin, ,

Mailing Address 3755 Everest Dr

| City <br> Montgomery | State <br> AL | Zip Code <br> $36106-3336$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) |  |  |
| BCBS Alabama  <br> Receipt For:  <br> Primary <br> Other (specify) Occupation (for Individual) <br> VP Governmental Affairs |  |  |

Date of Receipt


Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$120.00 Monthly)

| SUBTOTAL of Receipts This Page (optional)............................................................... | $219.69$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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

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

FOR LINE NUMBER: PAGE 22 OF
26 (check only one)


Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.
name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Sullivan, Christine, V, ,

Mailing Address 2058 Wild Flower Dr

| Mailing Address 2058 Wild Flower Dr |  |
| :---: | :---: |
| City Birmingham | State Zip Code <br> AL $35244-1723$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Account Executive |
|  | Aggregate Year-to-Date |

Date of Receipt


Transaction ID : PR78833725300
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Sultis, Chris, M,

Mailing Address 80 N Village Dr

| City <br> Gardendale | State <br> AL | Zip Code <br> $35071-4706$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> $\square$Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78833825300
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Syphurs, Jeffrey, R, ,

Mailing Address 318 Bedford Ave

| City Birmingham | State <br> AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35226-1505 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. |  |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Manager Claims Operations |  |
|  | Aggreg | r-to-Date $326.20$ |

Date of Receipt


Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$16.31 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)................................................................ $\downarrow$ | $156.93$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)........................................................ |  |

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

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

FOR LINE NUMBER: PAGE 23 OF (check only one)


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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Vice, Cynthia, M, ,

Mailing Address 936 Beech Ln

| Mailing Address 936 Beech Ln |  |  |
| :---: | :---: | :---: |
| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35213-2024 \end{array}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) SVP \& Chief Financial Officer |  |
| Receipt For: Primary General Other (specify) | Aggrega | r-to-Date <br> 1874.97 |

Date of Receipt

| $\begin{gathered} \mathrm{M} \mathrm{M}^{\prime} \\ 09 \end{gathered}$ | $\begin{gathered} D \quad D \\ 30 \end{gathered}$ | $\begin{gathered} y-y \\ 2016 \end{gathered}$ |
| :---: | :---: | :---: |

Transaction ID : PR78834325300
Amount of Each Receipt this Period
$\square 208.33$

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Walden, Joseph, Clay,

Mailing Address 14 Signal Hill Rd

| City <br> Spanish Fort | State <br> AL | Zip Code <br> $36527-3138$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. |  |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> $\square$Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78834525300
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$21.31 Bi-Weekly)

## Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ward, Brandon, S, ,

Mailing Address 109 Coshatt Trl

| City <br> Birmingham | State <br> AL | Zip Code <br> $35244-2439$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For:  <br> Primary <br> Other (specify) Occupation (for Individual) <br> VP Business Services |  |  |

Date of Receipt


Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................. | , , 480.59 |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | , - , - - - . |

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

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

FOR LINE NUMBER: PAGE 24 OF (check only one)


Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.
name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Warren, Susan, M, ,

Mailing Address 2021 Chandapine Cir

| City <br> Pelham | State <br> AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35124-1430 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) <br> gr Corporate Strategy |
| Receipt For: Primary General Other (specify) | Aggreg | ar-to-Date $378.40$ |

Date of Receipt

| M1M M |  |  |  |
| :---: | :---: | :---: | :---: |
| 09 | D | 30 | 2016 |

Transaction ID : PR78834725300
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$18.92 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Watkins, James, M,

Mailing Address 1935 Red Oak Ln NE

| City <br> Arab | State <br> AL | Zip Code <br> $35016-5360$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For:  <br> $\square$ Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78834825300
Amount of Each Receipt this Period
$\square 57.15$

## Memo Item

P/R Deduction (\$19.05 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Whitehead, Ronald, B, , $\qquad$
Mailing Address 1009 Margaret St

| City <br> Leeds | State <br> AL | Zip Code 35094-2736 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | $\mathrm{C}$ | $\boxed{\pi}$ |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) HBS CFO |  |
|  | Aggrega | -to-Date $481.14$ |


| SUBTOTAL of Receipts This Page (optional)................................................................. | $179.52$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | - |

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

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

FOR LINE NUMBER: PAGE 25 OF 26 (check only one)


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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Williams, John, T, ,

Mailing Address 8625 Anna PI

| Mailing Address 8625 Anna PI |  |
| :---: | :---: |
| City <br> Montgomery | State Zip Code <br> AL $36116-6693$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) District Manager |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ |

Date of Receipt

| $\begin{gathered} M \\ 09 \end{gathered}$ | $\begin{gathered} D \quad D \\ 30 \end{gathered}$ | $\begin{aligned} & y=r \\ & 2016 \end{aligned}$ |
| :---: | :---: | :---: |

Transaction ID : PR78835025300
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Hill, James, S,

Mailing Address 130 Hampton Drive

| City <br> Pelham | State <br> AL | Zip Code <br> 35244 |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS AL | Occupation (for Individual) <br> SVP Business Operations |  |
| Receipt For: <br> $\square$ <br> Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR94042825300
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

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

## Mailing Address



## Date of Receipt



## Amount of Each Receipt this Period



| SUBTOTAL of Receipts This Page (optional)..................................................................... | $249.61$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)......................................................... | $7325.36$ |

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



Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name (Last, First, Middle Initial)
A. Robert Aderholt for Congress

| Mailing Address PO Box 1158 |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| City Haleyville |  |  |  | $\begin{gathered} \hline \text { State } \\ \text { AL } \end{gathered}$ | $\begin{aligned} & \text { Zip Code } \\ & 35565-1158 \end{aligned}$ |  |
| Purpose of Disbursement Direct Contribution |  |  |  |  |  | 011 |
| Candidate Name Aderholt, Robert, , , |  |  |  |  |  | Category/ Type |
| Office Sought: <br> State: AL | $\mathbf{x}$ Ho <br> Se <br>  Pr <br> District:  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial) Terri Sewell for Congress |  |  |  |  |  |  |


C.


## Date of Disbursement



FEC Identification Number
C
Amount of Each Disbursement this Period

$\square$ Memo Item

| SUBTOTAL of Disbursements This Page (optional)........................................................ | $10000.00$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... ${ }^{\text {. }}$. | , 10000.00 |

