

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) **601 12th Street**
 Check if different than previously reported. (ACC) **Oakland CA 94607**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00340364 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period / / 2024 through / / 2024

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 **Glidden, Emily, , ,**

Signature of Treasurer **Glidden, Emily, , ,** Date / / 2024

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

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Blue Shield of California PAC (Shield PAC)

Report Covering the Period: From: 03 / 01 / 2024 To: 03 / 31 / 2024

Table with 2 columns: COLUMN A This Period, COLUMN B Calendar Year-to-Date. Rows include: 6. (a) Cash on Hand January 1, 2024 (55011.19); (b) Cash on Hand at Beginning of Reporting Period (57035.58); (c) Total Receipts (from Line 19) (13109.32 / 47644.62); (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) (70144.90 / 102655.81); 7. Total Disbursements (from Line 31) (11008.22 / 43519.13); 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) (59136.68 / 59136.68); 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) (0.00); 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) (0.00).

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Blue Shield of California PAC (Shield PAC)

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4855.00	12538.50
(ii) Unitemized	8254.32	32606.12
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	13109.32	45144.62
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	13109.32	45144.62
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	13109.32	47644.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	13109.32	47644.62

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	8.22	19.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	8.22	19.13
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11000.00	43500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	11008.22	43519.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11008.22	43519.13

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	13109.32	45144.62
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13109.32	45144.62
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	8.22	19.13
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8.22	19.13

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Arjoyan, Aliza, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Senior Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34116
 Amount of Each Receipt this Period 70.00
 Memo Item

B. Barnes, Tracy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CALIFORNIA Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA33937
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Bergman, Patrice, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34008
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	220.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Blakeman, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34071
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Boudreau, Theresa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA33973
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Chasin, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CALIFORNIA Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34033
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	280.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Clarke, Sandra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Chief Financial Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34130
 Amount of Each Receipt this Period 70.00
 Memo Item

B. Davis, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Senior Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34165
 Amount of Each Receipt this Period 70.00
 Memo Item

C. DeAngelis, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34149
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	180.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 32
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Ejuwa, Jacqueline, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA33971
 Amount of Each Receipt this Period 45.00
 Memo Item

B. Evans, Timothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Vice President, Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34210
 Amount of Each Receipt this Period 45.00
 Memo Item

C. Ferreira, Kristina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Growth & Strategy Vice President, Com
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA33946
 Amount of Each Receipt this Period 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Goldberg, David, , ,		Date of Receipt MM / DD / YYYY 03 / 14 / 2024
Mailing Address 601 12th Street		Transaction ID : IA34105
City Oakland	State CA	Zip Code 94607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer (for Individual) BLUE SHIELD OF CA	Occupation (for Individual) DIRECTOR	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hendrickson, Ruth, , ,		Date of Receipt MM / DD / YYYY 03 / 14 / 2024
Mailing Address 601 12th Street		Transaction ID : IA34084
City Oakland	State CA	Zip Code 94607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer (for Individual) BLUE SHIELD OF CA	Occupation (for Individual) VP	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Horn, Peter M., , ,		Date of Receipt MM / DD / YYYY 03 / 14 / 2024
Mailing Address 601 12th Street		Transaction ID : IA34125
City Oakland	State CA	Zip Code 94607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00
Name of Employer (for Individual) Blue Shield of California	Occupation (for Individual) Vice President, Growth Finance	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 315.00	

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Kavasery, Ravi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Laboratory Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34188
 Amount of Each Receipt this Period 45.00
 Memo Item

B. Khemani, Pradip, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34019
 Amount of Each Receipt this Period 35.00
 Memo Item

C. Kibler, Tina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CALIFORNIA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 469.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA33992
 Amount of Each Receipt this Period 67.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	147.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 32
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Kiefer, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34038
 Amount of Each Receipt this Period
 200.00
 Memo Item

B. Kim, Keith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA33994
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. Lautsch, Kenneth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34114
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	285.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Lieb, Timothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Senior Vice President, Commercial Mar
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34206
 Amount of Each Receipt this Period 70.00
 Memo Item

B. Lum, Alison, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34043
 Amount of Each Receipt this Period 45.00
 Memo Item

C. Macdonald, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34187
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	165.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Markovich, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CALIFORNIA Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA33932
 Amount of Each Receipt this Period
 200.00
 Memo Item

B. Martin-Gill, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Vice President, Product
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34181
 Amount of Each Receipt this Period
 45.00
 Memo Item

C. McCambridge, Kevin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) SR. MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA33934
 Amount of Each Receipt this Period
 33.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	278.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Oubre, Nathaniel, , ,

Mailing Address 601 12th Street

City Oakland	State CA	Zip Code 94607
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Shield of California	Occupation (for Individual) Vice President, Performance
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2024

Transaction ID : IA34203

Amount of Each Receipt this Period
45.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Parker, Chad, , ,

Mailing Address 601 12th Street

City Oakland	State CA	Zip Code 94607
-----------------	-------------	-------------------

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

Name of Employer (for Individual) BLUE SHIELD OF CA	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2024

Transaction ID : IA34041

Amount of Each Receipt this Period
40.00

Memo Item

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

Mailing Address 601 12th Street

City Oakland	State CA	Zip Code 94607
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Shield of California	Occupation (for Individual) Vice President, Infrastructure Service
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2024

Transaction ID : IA34191

Amount of Each Receipt this Period
45.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 16 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Phillips Husband, Vivian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Vice President of Customer Experience
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34211
 Amount of Each Receipt this Period 70.00
 Memo Item

B. Qin, Yuan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Vice President, Pricing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34185
 Amount of Each Receipt this Period 45.00
 Memo Item

C. Ramachandran, Krishna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Senior Vice President, Health Transfor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34217
 Amount of Each Receipt this Period 70.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 32
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Solomon, Gilbert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CALIFORNIA Occupation (for Individual) MEDICAL DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA33959
 Amount of Each Receipt this Period
 47.50
 Memo Item

B. Spector, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA33980
 Amount of Each Receipt this Period
 85.00
 Memo Item

C. Stern, Kelly E., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34029
 Amount of Each Receipt this Period
 65.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	197.50
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 32
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Stuart, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34072
 Amount of Each Receipt this Period 45.00
 Memo Item

B. Williams, Bryce, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2024
Transaction ID : IA34034
 Amount of Each Receipt this Period 45.00
 Memo Item

C. Arjohan, Aliza, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Senior Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2024
Transaction ID : IA34411
 Amount of Each Receipt this Period 70.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Barnes, Tracy, , ,		Date of Receipt MM / DD / YYYY 03 / 28 / 2024 Transaction ID : IA34231
Mailing Address 601 12th Street		Amount of Each Receipt this Period 50.00
City Oakland	State CA	Zip Code 94607
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) BLUE SHIELD OF CALIFORNIA	Occupation (for Individual) DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Bergman, Patrice, , ,		Date of Receipt MM / DD / YYYY 03 / 28 / 2024 Transaction ID : IA34302
Mailing Address 601 12th Street		Amount of Each Receipt this Period 100.00
City Oakland	State CA	Zip Code 94607
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) BLUE SHIELD OF CA	Occupation (for Individual) VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Blakeman, Elizabeth, , ,		Date of Receipt MM / DD / YYYY 03 / 28 / 2024 Transaction ID : IA34366
Mailing Address 601 12th Street		Amount of Each Receipt this Period 30.00
City Oakland	State CA	Zip Code 94607
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) BLUE SHIELD OF CA	Occupation (for Individual) DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional).....▶	180.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Boudreau, Theresa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 28 / 2024
Transaction ID : IA34267
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Chasin, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CALIFORNIA Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 03 / 28 / 2024
Transaction ID : IA34327
 Amount of Each Receipt this Period 200.00
 Memo Item

C. Clarke, Sandra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Chief Financial Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt 03 / 28 / 2024
Transaction ID : IA34425
 Amount of Each Receipt this Period 70.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	320.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Davis, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Senior Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2024
Transaction ID : IA34460
 Amount of Each Receipt this Period 70.00
 Memo Item

B. DeAngelis, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2024
Transaction ID : IA34444
 Amount of Each Receipt this Period 40.00
 Memo Item

C. Ejuwa, Jacqueline, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2024
Transaction ID : IA34265
 Amount of Each Receipt this Period 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	155.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Evans, Timothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Vice President, Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2024
Transaction ID : IA34504
 Amount of Each Receipt this Period 45.00
 Memo Item

B. Ferreira, Kristina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Growth & Strategy Vice President, Cor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2024
Transaction ID : IA34240
 Amount of Each Receipt this Period 45.00
 Memo Item

C. Goldberg, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2024
Transaction ID : IA34400
 Amount of Each Receipt this Period 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 32
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Hendrickson, Ruth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2024
Transaction ID : IA34379
 Amount of Each Receipt this Period 45.00
 Memo Item

B. Horn, Peter M., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Vice President, Growth Finance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2024
Transaction ID : IA34420
 Amount of Each Receipt this Period 45.00
 Memo Item

C. Kavasery, Ravi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Laboratory Medical Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2024
Transaction ID : IA34482
 Amount of Each Receipt this Period 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Khemani, Pradip, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 03 / 28 / 2024
Transaction ID : IA34313
 Amount of Each Receipt this Period 35.00
 Memo Item

B. Kibler, Tina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CALIFORNIA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 469.00

Date of Receipt 03 / 28 / 2024
Transaction ID : IA34286
 Amount of Each Receipt this Period 67.00
 Memo Item

C. Kiefer, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 03 / 28 / 2024
Transaction ID : IA34332
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	302.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 32		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Kim, Keith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 03 / 28 / 2024
Transaction ID : IA34288
 Amount of Each Receipt this Period 35.00
 Memo Item

B. Lautsch, Kenneth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 28 / 2024
Transaction ID : IA34409
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Lieb, Timothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Senior Vice President, Commercial Mar
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt 03 / 28 / 2024
Transaction ID : IA34500
 Amount of Each Receipt this Period 70.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	155.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Lum, Alison, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2024
Transaction ID : IA34337
 Amount of Each Receipt this Period
 45.00
 Memo Item

B. Macdonald, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2024
Transaction ID : IA34481
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Markovich, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CALIFORNIA Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2024
Transaction ID : IA34226
 Amount of Each Receipt this Period
 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	295.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 32
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Martin-Gill, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Vice President, Product
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 03 / 28 / 2024
Transaction ID : IA34475
 Amount of Each Receipt this Period 45.00
 Memo Item

B. McCambridge, Kevin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) SR. MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 03 / 28 / 2024
Transaction ID : IA34228
 Amount of Each Receipt this Period 33.00
 Memo Item

C. Oubre, Nathaniel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Vice President, Performance
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 03 / 28 / 2024
Transaction ID : IA34497
 Amount of Each Receipt this Period 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	123.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 32
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Parker, Chad, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 28 / 2024
Transaction ID : IA34335
 Amount of Each Receipt this Period 40.00
 Memo Item

B. Peterson, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Vice President, Infrastructure Service
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 03 / 28 / 2024
Transaction ID : IA34485
 Amount of Each Receipt this Period 45.00
 Memo Item

C. Phillips Husband, Vivian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Vice President of Customer Experience
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt 03 / 28 / 2024
Transaction ID : IA34505
 Amount of Each Receipt this Period 70.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	155.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Qin, Yuan, , ,		Date of Receipt MM / DD / YYYY 03 / 28 / 2024 Transaction ID : IA34479
Mailing Address 601 12th Street		Amount of Each Receipt this Period 45.00
City Oakland	State CA	Zip Code 94607
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Blue Shield of California	Occupation (for Individual) Vice President, Pricing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ramachandran, Krishna, , ,		Date of Receipt MM / DD / YYYY 03 / 28 / 2024 Transaction ID : IA34511
Mailing Address 601 12th Street		Amount of Each Receipt this Period 70.00
City Oakland	State CA	Zip Code 94607
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Blue Shield of California	Occupation (for Individual) Senior Vice President, Health Transfor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Solomon, Gilbert, , ,		Date of Receipt MM / DD / YYYY 03 / 28 / 2024 Transaction ID : IA34253
Mailing Address 601 12th Street		Amount of Each Receipt this Period 47.50
City Oakland	State CA	Zip Code 94607
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) BLUE SHIELD OF CALIFORNIA	Occupation (for Individual) MEDICAL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 332.50	

SUBTOTAL of Receipts This Page (optional).....▶	162.50
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 32
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Spector, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2024
Transaction ID : IA34274
 Amount of Each Receipt this Period
 85.00
 Memo Item

B. Stern, Kelly E., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2024
Transaction ID : IA34323
 Amount of Each Receipt this Period
 65.00
 Memo Item

C. Stuart, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 12th Street
 City Oakland State CA Zip Code 94607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE SHIELD OF CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2024
Transaction ID : IA34367
 Amount of Each Receipt this Period
 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	195.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 OF 32
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Shield of California PAC (Shield PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Williams, Bryce, , ,

Mailing Address 601 12th Street

City Oakland	State CA	Zip Code 94607
-----------------	-------------	-------------------

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

Name of Employer (for Individual) BLUE SHIELD OF CA	Occupation (for Individual) DIRECTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	28	/	2024

Transaction ID : IA34328

Amount of Each Receipt this Period
45.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	4855.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Shield of California PAC (Shield PAC)

Full Name (Last, First, Middle Initial)

A. Lofgren for Congress

Mailing Address 1346 The Alameda, Suite 7-380

City San Jose State CA Zip Code 95126

Purpose of Disbursement

011
Category/ Type

Candidate Name

Lofgren, Zoe, , ,

Office Sought: House Senate President

Disbursement For: 2024 Primary General Other (specify) ▼

State: CA District: 19

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 04 / 2024

FEC Identification Number

C C00289603

Transaction ID : EB34221

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Adelante Fund

Mailing Address 777 S. Figueroa Street, Suite 4050

City Los Angeles State CA Zip Code 90017

Purpose of Disbursement

011
Category/ Type

Candidate Name

Adelante Fund

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 20 / 2024

FEC Identification Number

C C00868117

Transaction ID : EB34222

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Johnson Leadership Fund

Mailing Address 228 S. Washington Street, Suite 11

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

011
Category/ Type

Candidate Name

Johnson Leadership Fund

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 20 / 2024

FEC Identification Number

C C00771246

Transaction ID : EB34223

Amount of Each Disbursement this Period

1000.00

Memo Item

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

11000.00

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

11000.00
