

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

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

2. FEC IDENTIFICATION NUMBER C C00340364 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 07 / 01 / 2011 through 12 / 31 / 2011

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 Emily Glidden

Signature of Treasurer Emily Glidden [Electronically Filed] Date 01 / 30 / 2012

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>		78040.09
(b) Cash on Hand at Beginning of Reporting Period.....	103895.72	
(c) Total Receipts (from Line 19) .....	72486.11	137102.41
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	176381.83	215142.50
7. Total Disbursements (from Line 31).....	77996.42	116757.09
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	98385.41	98385.41
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

Report Covering the Period: From:  /  /  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).....	65432.75	110109.52
(ii) Unitemized .....	7053.36	23992.89
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	72486.11	134102.41
(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) .....	72486.11	134102.41
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	3000.00
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))..... ▶	72486.11	137102.41
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	72486.11	137102.41

**DETAILED SUMMARY PAGE**

of Disbursements

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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 .....	215.00	215.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	215.00	215.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	77500.00	116000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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 .....	281.42	542.09
30. Federal Election Activity (2 U.S.C. §431(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)) ..	77996.42	116757.09
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	77996.42	116757.09

**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) .....	72486.11	134102.41
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	72486.11	134102.41
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	215.00	215.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	215.00	215.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 86
<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 POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Dennis Alva</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11Al.11942</b>
Mailing Address emp xx9311 50 Beale Street		Amount of Each Receipt this Period 308.07
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$21.58
Name of Employer Blue Shield of California	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 586.28	

Full Name (Last, First, Middle Initial) <b>B. Christine Amacher</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11Al.11943</b>
Mailing Address Employee #xx0096 50 Beale Street		Amount of Each Receipt this Period 350.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$25.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) <b>C. Robert T Amland II</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11Al.11944</b>
Mailing Address 50 Beale Street		Amount of Each Receipt this Period 140.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$10.00
Name of Employer Blue Shield of CA	Occupation Employee #xx5875	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	798.07
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. David A Arnold Jr.**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx4648  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
945.00

Date of Receipt  
12 / 31 / 2011  
Transaction ID : SA11AI.11947

Amount of Each Receipt this Period  
490.00

Payroll contribution per cycle \$35.00

**B. Terri J. Baker**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx1950, 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
594.00

Date of Receipt  
12 / 31 / 2011  
Transaction ID : SA11AI.11948

Amount of Each Receipt this Period  
308.00

Payroll contribution per cycle \$22.00

**C. Tanya Ballow**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx8347  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation employee # 108347

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
607.50

Date of Receipt  
12 / 31 / 2011  
Transaction ID : SA11AI.11949

Amount of Each Receipt this Period  
315.00

Payroll contribution per cycle \$22.50

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1113.00

**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 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. Bret Balousek</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.11950</b>
Mailing Address emp xx527 50 Beale Street		Amount of Each Receipt this Period 210.00 Payroll contribution per cycle \$15.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of California	Occupation employee # 115527
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	

Full Name (Last, First, Middle Initial) <b>B. Patrick Banghart</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.11951</b>
Mailing Address emp xx5427 50 Beale Street		Amount of Each Receipt this Period 140.00 Payroll contribution per cycle \$10.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of California	Occupation Employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>C. Tracy Barnes</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.11952</b>
Mailing Address emp xx2076 50 Beale Street		Amount of Each Receipt this Period 560.00 Payroll contribution per cycle \$40.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of California	Occupation Employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1080.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	910.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Earl W. Barron III</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.11953</b>
Mailing Address Employee #xx6501 50 Beale St.,		Amount of Each Receipt this Period 350.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00	
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

Full Name (Last, First, Middle Initial) <b>B. David A. Battin</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.11955</b>
Mailing Address Employee #xx4657 50 Beale St.,		Amount of Each Receipt this Period 140.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00	
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>C. Michael Beuoy</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.11960</b>
Mailing Address Employee# 5248 50 Beale Street		Amount of Each Receipt this Period 225.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00	
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	715.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Vivek Bhatia</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2011 <b>Transaction ID : SA11AI.11962</b>
Mailing Address emp xx3173 50 Beale Street		Amount of Each Receipt this Period 385.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of California	Occupation Employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 710.00	
		Payroll contribution per cycle \$30.00

Full Name (Last, First, Middle Initial) <b>B. Douglas Biehn</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2011 <b>Transaction ID : SA11AI.11963</b>
Mailing Address emp xx2903, 50 Beale Street		Amount of Each Receipt this Period 280.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield	Occupation employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	
		Payroll contribution per cycle \$20.00

Full Name (Last, First, Middle Initial) <b>C. Gary Boatwright</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2011 <b>Transaction ID : SA11AI.11966</b>
Mailing Address Employee #xx7003 50 Beale St.,		Amount of Each Receipt this Period 210.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of CA	Occupation Employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	
		Payroll contribution per cycle \$15.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	875.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Bruce Bodaken**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx6451  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1620.00

Date of Receipt  
12 / 31 / 2011  
Transaction ID : SA11AI.11967

Amount of Each Receipt this Period  
840.00

Payroll contribution per cycle \$60.00

**B. Theresa Boudreau**  
Full Name (Last, First, Middle Initial)

Mailing Address Employee# xx3316  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of CA Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
12 / 31 / 2011  
Transaction ID : SA11AI.11968

Amount of Each Receipt this Period  
225.00

Payroll contribution per cycle \$15.00

**C. Diane Brennan**  
Full Name (Last, First, Middle Initial)

Mailing Address Employee #xx5384  
50 Beale St.,

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of CA Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
405.00

Date of Receipt  
12 / 31 / 2011  
Transaction ID : SA11AI.11971

Amount of Each Receipt this Period  
210.00

Payroll contribution per cycle \$15.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1275.00

**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 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Rene D. Brhely**  
Full Name (Last, First, Middle Initial)

Mailing Address Employee #xx0924  
50 Beale St.,  
City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of CA Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
405.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2011  
**Transaction ID : SA11AI.11972**

Amount of Each Receipt this Period  
210.00

Payroll contribution per cycle \$15.00

**B. Ruta Britts**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx2060  
50 Beale Street  
City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield Occupation employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
540.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2011  
**Transaction ID : SA11AI.11973**

Amount of Each Receipt this Period  
280.00

Payroll contribution per cycle \$20.00

**C. Laverne A Brizendine**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx6076  
50 Beale Street  
City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
675.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2011  
**Transaction ID : SA11AI.11974**

Amount of Each Receipt this Period  
350.00

Payroll contribution per cycle \$25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	840.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Thomas Brophy</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011 <b>Transaction ID : SA11AI.11975</b>
Mailing Address emp xx4076, 50 Beale Street		Amount of Each Receipt this Period 440.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$40.00
Name of Employer Blue Cross	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) <b>B. Sharon Brown</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011 <b>Transaction ID : SA11AI.11976</b>
Mailing Address Employee# xx5991 50 Beale Street		Amount of Each Receipt this Period 250.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$25.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. William Brown</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011 <b>Transaction ID : SA11AI.11978</b>
Mailing Address emp xx9004, 50 Beale Street		Amount of Each Receipt this Period 449.01
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$29.77
Name of Employer Blue Shield	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 829.26	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1139.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Michael-Anne Browne</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.11979</b>
Mailing Address emp xx1514 50 Beale Street		Amount of Each Receipt this Period 370.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$27.00
Name of Employer Blue Shield of California	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 695.00	

Full Name (Last, First, Middle Initial) <b>B. Sue Burke</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.11982</b>
Mailing Address emp xx4016 50 Beale Street		Amount of Each Receipt this Period 140.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$10.00
Name of Employer Blue Shield of California	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>C. Wendy Cerruti</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.11988</b>
Mailing Address emp xx2821, 50 Beale Street		Amount of Each Receipt this Period 700.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$50.00
Name of Employer Blue Shield	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1210.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. George R. Chadwell</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.11989</b>
Mailing Address emp xx0628 50 Beale Street		Amount of Each Receipt this Period 199.96
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$13.89	
Name of Employer Blue Shield of California	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 379.98	

Full Name (Last, First, Middle Initial) <b>B. Andrew Chasin</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.11990</b>
Mailing Address Employee #xx8020 50 Beale Street		Amount of Each Receipt this Period 390.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$30.00	
Name of Employer Blue Shield of California	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 715.00	

Full Name (Last, First, Middle Initial) <b>C. Michael Chiarodit</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.11991</b>
Mailing Address Employee #xx7088 50 Beale St.,		Amount of Each Receipt this Period 210.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$15.00	
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	799.96
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Denise Ciufu**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx4063, 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield Occupation employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.11992**

Amount of Each Receipt this Period  
**175.00**

Payroll contribution per cycle \$15.00

**B. Karen Clark**  
Full Name (Last, First, Middle Initial)

Mailing Address Employee #xx3881  
50 Beale St.,

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of CA Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.11993**

Amount of Each Receipt this Period  
**140.00**

Payroll contribution per cycle \$10.00

**C. Eva I Condron-Wells**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx6079  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.11996**

Amount of Each Receipt this Period  
**140.00**

Payroll contribution per cycle \$10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **455.00**

**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 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Maureen Craig</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.11997</b>
Mailing Address Employee #xx7065 50 Beale St.,		Amount of Each Receipt this Period 140.00
City San Francisco,	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$10.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>B. Bryan Crawley</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.11998</b>
Mailing Address Employee # xx7742 50 Beale Street		Amount of Each Receipt this Period 140.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$10.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>C. Edward Cymerys</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.11999</b>
Mailing Address emp xx4609, 50 Beale Street		Amount of Each Receipt this Period 1400.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$100.00
Name of Employer Blue Shield	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1680.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Shannon Datcher**  
Full Name (Last, First, Middle Initial)

Mailing Address Employee #xx7287  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
580.00

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12000**

Amount of Each Receipt this Period  
320.00

Payroll contribution per cycle \$25.00

**B. Andrea D. DeBerry**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx1594  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12001**

Amount of Each Receipt this Period  
140.00

Payroll contribution per cycle \$10.00

**C. Susan Deleuw**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx4798  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
652.50

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12002**

Amount of Each Receipt this Period  
350.00

Payroll contribution per cycle \$25.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 810.00

**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 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Kevin DeLury</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12003</b>
Mailing Address Employee #xx5871 50 Beale St.,		Amount of Each Receipt this Period 30.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$30.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B. Ann DeRose</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12005</b>
Mailing Address emp xx3203 50 Beale Street		Amount of Each Receipt this Period 315.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$22.50
Name of Employer Blue Shield of California	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 607.50	

Full Name (Last, First, Middle Initial) <b>C. Rajkumar Dharmar</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12006</b>
Mailing Address Employee# xx8261 50 Beale Street		Amount of Each Receipt this Period 225.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$25.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	570.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Patricia R. Domenickine</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2011
Mailing Address emp xx1504 50 Beale Street		<b>Transaction ID : SA11AI.12010</b>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 630.00	
Name of Employer Blue Shield of California	Occupation Employee	Payroll contribution per cycle \$45.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1215.00	

Full Name (Last, First, Middle Initial) <b>B. Linda Dowsett</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2011
Mailing Address Emp xx4382 50 Beale Street		<b>Transaction ID : SA11AI.12012</b>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 290.00	
Name of Employer Blue Shield of CA	Occupation Employee	Payroll contribution per cycle \$25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 485.00	

Full Name (Last, First, Middle Initial) <b>C. Marjorie Drake</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2011
Mailing Address emp xx6271 50 Beale Street		<b>Transaction ID : SA11AI.12013</b>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 140.00	
Name of Employer Blue Shield of California	Occupation IFP Undewriting	Payroll contribution per cycle \$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1060.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Jacqueline Ejuwa</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12014</b>
Mailing Address Employee #xx3113 50 Beale Street		Amount of Each Receipt this Period 350.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$25.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) <b>B. James Elliott</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12015</b>
Mailing Address emp xx5549 50 Beale Street		Amount of Each Receipt this Period 1400.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$100.00
Name of Employer Blue Shield of California	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2700.00	

Full Name (Last, First, Middle Initial) <b>C. Thomas Epstein</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12017</b>
Mailing Address emp xx0249 50 Beale Street		Amount of Each Receipt this Period 1020.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$75.00
Name of Employer Blue Shield of California	Occupation Vice President, Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1930.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2770.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Jacqueline Espinoza**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address emp xx5623  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of California Occupation employee  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 824.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12018**  
 Amount of Each Receipt this Period  
 434.00  
 Payroll contribution per cycle \$32.00

**B. Elizabeth Este**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Employee #xx5702  
 50 Beale St.,  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of CA Occupation Employee  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12019**  
 Amount of Each Receipt this Period  
 140.00  
 Payroll contribution per cycle \$10.00

**C. Kathryn M. Ferguson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address emp xx2319  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of California Occupation Employee  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 459.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12023**  
 Amount of Each Receipt this Period  
 238.00  
 Payroll contribution per cycle \$17.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	812.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Heidi Fields**  
Full Name (Last, First, Middle Initial)

Mailing Address Employee #xx2238  
50 Beale St.,  
City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of CA Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3311.90

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12024**

Amount of Each Receipt this Period  
1723.40

Payroll contribution per cycle \$123.10

**B. Shirley Fierstadt**  
Full Name (Last, First, Middle Initial)

Mailing Address Employee #xx7428  
50 Beale Street  
City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of CA Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12025**

Amount of Each Receipt this Period  
140.00

Payroll contribution per cycle \$10.00

**C. Mark Finch**  
Full Name (Last, First, Middle Initial)

Mailing Address Employee #xx7875  
50 Beale Street  
City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of CA Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
675.00

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12026**

Amount of Each Receipt this Period  
350.00

Payroll contribution per cycle \$25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2213.40

**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 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Carol Fogelman</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12027</b>
Mailing Address emp xx2239 50 Beale Street		Amount of Each Receipt this Period 219.30
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of California	Occupation Employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 412.80	
		Payroll contribution per cycle \$15.87

Full Name (Last, First, Middle Initial) <b>B. Joseph Foley</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12028</b>
Mailing Address emp xx4742 50 Beale Street		Amount of Each Receipt this Period 183.75
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of California	Occupation employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.86	
		Payroll contribution per cycle \$12.95

Full Name (Last, First, Middle Initial) <b>C. Dawn Fortino</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12029</b>
Mailing Address Employee# xx8687 50 Beale Street		Amount of Each Receipt this Period 225.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of CA	Occupation Employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
		Payroll contribution per cycle \$25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	628.05
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Armine Fortunato</b>		Date of Receipt
Mailing Address Employee #xx5680 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Transaction ID : SA11AI.12031	
Name of Employer Blue Shield of CA	Occupation Employee	Amount of Each Receipt this Period 225.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	Payroll contribution per cycle \$25.00

Full Name (Last, First, Middle Initial) <b>B. Gregory Gardiner</b>		Date of Receipt
Mailing Address Employee #xx7674 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Transaction ID : SA11AI.12032	
Name of Employer Blue Shield of CA	Occupation Employee	Amount of Each Receipt this Period 350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	Payroll contribution per cycle \$25.00

Full Name (Last, First, Middle Initial) <b>C. Walter W Gendell</b>		Date of Receipt
Mailing Address emp xx7670 50 Beale Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Transaction ID : SA11AI.12035	
Name of Employer Blue Shield	Occupation Employee	Amount of Each Receipt this Period 210.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	Payroll contribution per cycle \$15.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	785.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. Devin Gensch</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12036</b>
Mailing Address emp xx4081 50 Beale Street		Amount of Each Receipt this Period 392.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$28.00
Name of Employer Blue Shield of California	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 756.00	

Full Name (Last, First, Middle Initial) <b>B. Robert Geyer</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12037</b>
Mailing Address emp xx2026 50 Beale Street		Amount of Each Receipt this Period 1050.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$75.00
Name of Employer Blue Shield of California	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2025.00	

Full Name (Last, First, Middle Initial) <b>C. Ketan Gima</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12040</b>
Mailing Address emp xx2246 50 Beale Street		Amount of Each Receipt this Period 700.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$50.00
Name of Employer Blue Shield of California	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2142.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Deborah Gordon</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12044</b>
Mailing Address emp xx5621 50 Beale Street		Amount of Each Receipt this Period 315.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of California	Occupation employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 607.50	
		Payroll contribution per cycle \$22.50

Full Name (Last, First, Middle Initial) <b>B. Christopher Gorecki</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12045</b>
Mailing Address emp xx5257 50 Beale Street		Amount of Each Receipt this Period 280.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of California	Occupation employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	
		Payroll contribution per cycle \$20.00

Full Name (Last, First, Middle Initial) <b>C. Reva Gould</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12046</b>
Mailing Address Employee #xx7893 50 Beale Street		Amount of Each Receipt this Period 350.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of CA	Occupation Employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	
		Payroll contribution per cycle \$25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	945.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Douglas Grant**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address emp xx7417  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of California Occupation Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12047**  
 Amount of Each Receipt this Period  
 140.00  
 Payroll contribution per cycle \$10.00

**B. Christy Gregg**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address emp xx2233  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of California Occupation employee  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 607.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12048**  
 Amount of Each Receipt this Period  
 315.00  
 Payroll contribution per cycle \$22.50

**C. Roger Gutzman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Employee #xx1911  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of CA Occupation Employee  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12049**  
 Amount of Each Receipt this Period  
 140.00  
 Payroll contribution per cycle \$10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 595.00  
**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 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. David Hall**  
Full Name (Last, First, Middle Initial)

Mailing Address Employee #xx5061  
50 Beale St.,  
City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of CA Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12050**

Amount of Each Receipt this Period  
140.00

Payroll contribution per cycle \$10.00

**B. John Hedberg**  
Full Name (Last, First, Middle Initial)

Mailing Address Employee #xx7678  
50 Beale Street  
City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of CA Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
675.00

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12055**

Amount of Each Receipt this Period  
350.00

Payroll contribution per cycle \$25.00

**C. Jeffrey Hermsillo**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx4845  
50 Beale Street  
City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
607.50

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12056**

Amount of Each Receipt this Period  
315.00

Payroll contribution per cycle \$22.50

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 805.00

**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 30 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. William Hill**  
Full Name (Last, First, Middle Initial)

Mailing Address Employee #xx5665  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of CA Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12057**

Amount of Each Receipt this Period  
140.00

Payroll contribution per cycle \$10.00

**B. Larry Hilty**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx9314  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
445.00

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12058**

Amount of Each Receipt this Period  
250.00

Payroll contribution per cycle \$20.00

**C. Louis Hirsh**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx9409  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
607.50

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12059**

Amount of Each Receipt this Period  
315.00

Payroll contribution per cycle \$22.50

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 705.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Brent Hitchings</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011 <b>Transaction ID : SA11AI.12060</b>
Mailing Address emp xx5569 50 Beale Street		Amount of Each Receipt this Period 630.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of California	Occupation employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1215.00	Payroll contribution per cycle \$45.00

Full Name (Last, First, Middle Initial) <b>B. Jennifer Hobart</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011 <b>Transaction ID : SA11AI.12061</b>
Mailing Address Employee #xx6684 50 Beale Street		Amount of Each Receipt this Period 560.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of CA	Occupation Employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1080.00	Payroll contribution per cycle \$40.00

Full Name (Last, First, Middle Initial) <b>C. Bridget E Hoffman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011 <b>Transaction ID : SA11AI.12062</b>
Mailing Address emp xx9335 50 Beale Street		Amount of Each Receipt this Period 140.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield	Occupation Employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	Payroll contribution per cycle \$10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1330.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Helena Hoffman</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12063</b>
Mailing Address emp xx5671 50 Beale Street		Amount of Each Receipt this Period 154.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$11.00
Name of Employer Blue Shield of California	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.00	

Full Name (Last, First, Middle Initial) <b>B. Terry Hokinson</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12064</b>
Mailing Address Employee #xx7017 50 Beale St.,		Amount of Each Receipt this Period 350.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$25.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

Full Name (Last, First, Middle Initial) <b>C. Michael Horan</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12065</b>
Mailing Address Employee #xx6453 50 Beale St.,		Amount of Each Receipt this Period 140.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$10.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	644.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Stanford Hornbacher**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address emp xx6615  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of Callifornia Occupation employee  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **607.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12066**  
 Amount of Each Receipt this Period  
**315.00**  
 Payroll contribution per cycle \$22.50

**B. Diana Huang**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address emp xx4587, 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield Occupation employee  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **270.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12067**  
 Amount of Each Receipt this Period  
**140.00**  
 Payroll contribution per cycle \$10.00

**C. Thomas Hurd**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Employee #xx6366  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of CA Occupation Employee  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **810.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12068**  
 Amount of Each Receipt this Period  
**420.00**  
 Payroll contribution per cycle \$30.00

**SUBTOTAL** of Receipts This Page (optional)..... **875.00**  
**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 34 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Tony R. Ibarra**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx2981  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
405.00

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12070**

Amount of Each Receipt this Period  
210.00

Payroll contribution per cycle \$15.00

**B. Kristina Isberg**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx3306, 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield Occupation employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
202.00

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12071**

Amount of Each Receipt this Period  
124.00

Payroll contribution per cycle \$10.00

**C. Marianne Jackson**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx2372  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation Senior Vice President, Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2160.00

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12073**

Amount of Each Receipt this Period  
1120.00

Payroll contribution per cycle \$80.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1454.00

**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 35 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Seth Jacobs**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx6574  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
840.00

Date of Receipt  
12 / 31 / 2011  
Transaction ID : SA11AI.12074

Amount of Each Receipt this Period  
482.50

Payroll contribution per cycle \$35.00

**B. George Jaresko**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx5244  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
405.00

Date of Receipt  
12 / 31 / 2011  
Transaction ID : SA11AI.12075

Amount of Each Receipt this Period  
210.00

Payroll contribution per cycle \$15.00

**C. Lorie Johns**  
Full Name (Last, First, Middle Initial)

Mailing Address Employee #xx5447  
50 Beale St.,

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of CA Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
607.50

Date of Receipt  
12 / 31 / 2011  
Transaction ID : SA11AI.12078

Amount of Each Receipt this Period  
315.00

Payroll contribution per cycle \$22.50

**SUBTOTAL** of Receipts This Page (optional).....▶ 1007.50

**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 36 OF 86
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Michael Johnson</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12079</b>
Mailing Address emp xx1769 50 Beale Street		Amount of Each Receipt this Period 420.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of California	Occupation Employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 810.00	
		Payroll contribution per cycle \$30.00

Full Name (Last, First, Middle Initial) <b>B. David Joyner</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12082</b>
Mailing Address emp xx9639 50 Beale Street		Amount of Each Receipt this Period 560.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of California	Occupation Vice President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1080.00	
		Payroll contribution per cycle \$40.00

Full Name (Last, First, Middle Initial) <b>C. Allison Kawamoto</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12083</b>
Mailing Address emp xx4997 50 Beale Street		Amount of Each Receipt this Period 200.06
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of California	Occupation employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.08	
		Payroll contribution per cycle \$14.29

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1180.06
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Pradip Khemani**  
Full Name (Last, First, Middle Initial)

Mailing Address Employee #xx7222  
50 Beale St.,  
City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of CA Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
377.50

Date of Receipt  
12 / 31 / 2011  
Transaction ID : SA11AI.12087

Amount of Each Receipt this Period  
280.00

Payroll contribution per cycle \$25.00

**B. Tina Kibler**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx5267  
50 Beale Street  
City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1350.00

Date of Receipt  
12 / 31 / 2011  
Transaction ID : SA11AI.12088

Amount of Each Receipt this Period  
700.00

Payroll contribution per cycle \$50.00

**C. Andrew Kiefer**  
Full Name (Last, First, Middle Initial)

Mailing Address Employee #xx8277  
50 Beale Street  
City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of CA Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  
12 / 31 / 2011  
Transaction ID : SA11AI.12089

Amount of Each Receipt this Period  
350.00

Payroll contribution per cycle \$25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1330.00

**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 38 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Keith Kim**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Employee #xx5487  
 50 Beale St.,  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of CA Occupation Employee  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **675.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12090**  
 Amount of Each Receipt this Period  
**350.00**  
 Payroll contribution per cycle \$25.00

**B. Yun Kim**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address emp xx9394  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of California Occupation Employee  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **270.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12091**  
 Amount of Each Receipt this Period  
**140.00**  
 Payroll contribution per cycle \$10.00

**C. Douglas King**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Employee# xx7935  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of CA Occupation Employee  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **275.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12092**  
 Amount of Each Receipt this Period  
**275.00**  
 Payroll contribution per cycle \$25.00

**SUBTOTAL** of Receipts This Page (optional)..... **765.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Nora Lam**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx5642  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
405.00

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12103**

Amount of Each Receipt this Period  
210.00

Payroll contribution per cycle \$15.00

**B. Lisa Lambert**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx2157, 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield Occupation employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12104**

Amount of Each Receipt this Period  
140.00

Payroll contribution per cycle \$10.00

**C. Janice A Lea**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx2048  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12107**

Amount of Each Receipt this Period  
50.00

Payroll contribution per cycle \$25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 40 OF 86
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Ellen Lee**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx4606, 50 Beale Street

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

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

Name of Employer Blue Shield	Occupation employee
---------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **286.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2011

**Transaction ID : SA11Al.12108**

Amount of Each Receipt this Period  

156.00
--------

Payroll contribution per cycle \$12.00

**B. Janice Levinsky**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx1653  
50 Beale Street

City San Francisco	State CA	Zip Code 94105
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FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield of California	Occupation employee
---	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2011

**Transaction ID : SA11Al.12109**

Amount of Each Receipt this Period  

210.00
--------

Payroll contribution per cycle \$15.00

**C. Laura Lewis**  
Full Name (Last, First, Middle Initial)

Mailing Address 50 Beale Street

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

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

Name of Employer Blue Shield of California	Occupation employee # xx2384
---	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **607.50**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2011

**Transaction ID : SA11Al.12111**

Amount of Each Receipt this Period  

315.00
--------

Payroll contribution per cycle \$22.50

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>681.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)  
**A. Anthony Lipp**

Mailing Address 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation employee # xx4138

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **607.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11Al.12114**

Amount of Each Receipt this Period  
**315.00**

Payroll contribution per cycle \$22.50

Full Name (Last, First, Middle Initial)  
**B. Louis Lombardo**

Mailing Address emp xx5859  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **607.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11Al.12115**

Amount of Each Receipt this Period  
**315.00**

Payroll contribution per cycle \$22.50

Full Name (Last, First, Middle Initial)  
**C. Kathleen M. Lucke**

Mailing Address emp xx1911  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **855.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11Al.12117**

Amount of Each Receipt this Period  
**438.90**

Payroll contribution per cycle \$31.35

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1068.90</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Analisa Luippold</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12119</b>
Mailing Address Employee #xx6832 50 Beale St.,		Amount of Each Receipt this Period 210.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$15.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

Full Name (Last, First, Middle Initial) <b>B. Kathleen Lynaugh</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12122</b>
Mailing Address emp xx9411 50 Beale Street		Amount of Each Receipt this Period 490.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$35.00
Name of Employer Blue Shield of California	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 945.00	

Full Name (Last, First, Middle Initial) <b>C. Elinor Mackinnon</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12123</b>
Mailing Address emp xx3314, 50 Beale Street		Amount of Each Receipt this Period 770.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$55.00
Name of Employer Blue Shield	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1485.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1470.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Deanna Malone</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12124</b>
Mailing Address Employee# xx5489 50 Beale Street		Amount of Each Receipt this Period 140.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$10.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B. Laura Malone</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12125</b>
Mailing Address Employee #xx6330 50 Beale St.,		Amount of Each Receipt this Period 275.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$25.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>C. Paul Markovich</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12126</b>
Mailing Address emp xx6510 50 Beale Street		Amount of Each Receipt this Period 1148.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$82.00
Name of Employer Blue Shield of California	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2214.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1563.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Eskander Matta**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Employee #xx6953  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of CA Occupation Employee  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **675.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12130**  
 Amount of Each Receipt this Period  
**350.00**  
 Payroll contribution per cycle \$25.00

**B. Russell McBrien**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Employee #xx7330  
 50 Beale St.,  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of CA Occupation Employee  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **270.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12132**  
 Amount of Each Receipt this Period  
**140.00**  
 Payroll contribution per cycle \$10.00

**C. Thomas McCaffery**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address emp xx5792  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of California Occupation employee  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **810.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12133**  
 Amount of Each Receipt this Period  
**420.00**  
 Payroll contribution per cycle \$30.00

**SUBTOTAL** of Receipts This Page (optional)..... **910.00**  
**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 45 OF 86  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Shelley McFarland**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address emp xx1236, 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield Occupation employee  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **256.27**

Date of Receipt **12 / 31 / 2011**  
**Transaction ID : SA11AI.12135**  
 Amount of Each Receipt this Period **133.84**  
 Payroll contribution per cycle \$9.46

**B. Catherine McGee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Employee #xx7004 50 Beale St.,  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of CA Occupation Employee  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **675.00**

Date of Receipt **12 / 31 / 2011**  
**Transaction ID : SA11AI.12136**  
 Amount of Each Receipt this Period **350.00**  
 Payroll contribution per cycle \$25.00

**C. William McQueen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Employee #xx5076 50 Beale St.,  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of CA Occupation Employee  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **12 / 31 / 2011**  
**Transaction ID : SA11AI.12137**  
 Amount of Each Receipt this Period **140.00**  
 Payroll contribution per cycle \$10.00

**SUBTOTAL** of Receipts This Page (optional)..... **623.84**  
**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: (check only one)	PAGE 46 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Andrea Minarcin**  
Full Name (Last, First, Middle Initial)

Mailing Address 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation employee # xx4753

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12140**

Amount of Each Receipt this Period  
**275.00**

Payroll contribution per cycle \$25.00

**B. Kristen Miranda**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx3904, 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield Occupation employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1080.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12141**

Amount of Each Receipt this Period  
**560.00**

Payroll contribution per cycle \$40.00

**C. Michael Moeller**  
Full Name (Last, First, Middle Initial)

Mailing Address Employee# xx8406  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of CA Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12142**

Amount of Each Receipt this Period  
**385.00**

Payroll contribution per cycle \$35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **1220.00**

**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 47 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. David Morris</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12144</b>
Mailing Address 50 Beale Street		Amount of Each Receipt this Period 140.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$10.00
Name of Employer Blue Shield of California	Occupation employee # xx4117	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>B. Diane Moss-Nellum</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12145</b>
Mailing Address Employee #xx4418 50 Beale Street		Amount of Each Receipt this Period 210.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$15.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	

Full Name (Last, First, Middle Initial) <b>C. Cathleen Murphy</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12146</b>
Mailing Address emp xx3067, 50 Beale Street		Amount of Each Receipt this Period 350.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$25.00
Name of Employer Blue Shield	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Jon Murphy</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12147</b>
Mailing Address emp xx2151 50 Beale Street		Amount of Each Receipt this Period 225.43
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$15.98	
Name of Employer Blue Shield of California	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 422.13	

Full Name (Last, First, Middle Initial) <b>B. Michelle Nast</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12148</b>
Mailing Address Employee #xx2744 50 Beale St.,		Amount of Each Receipt this Period 300.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$25.00	
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 495.00	

Full Name (Last, First, Middle Initial) <b>C. Paul Nicknig</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12151</b>
Mailing Address 50 Beale Street		Amount of Each Receipt this Period 90.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$22.50	
Name of Employer Blue Shield of California	Occupation employee # xx2383	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 382.50	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	615.43
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Christopher O'Brien</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11Al.12154</b>
Mailing Address Employee #xx6255 50 Beale St.,		Amount of Each Receipt this Period 150.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$25.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

Full Name (Last, First, Middle Initial) <b>B. Brian O'Leary</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11Al.12156</b>
Mailing Address emp xx3278 50 Beale Street		Amount of Each Receipt this Period 140.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$10.00
Name of Employer Blue Shield of California	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>C. Mikhael Oganessian</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11Al.12155</b>
Mailing Address Employee #xx6156 50 Beale St.,		Amount of Each Receipt this Period 140.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$10.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	430.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Ana Padilla**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Employee #xx6534  
 50 Beale St.,  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of CA Occupation Employee  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **270.00**

Date of Receipt  
 12 / 31 / 2011  
**Transaction ID : SA11Al.12162**  
 Amount of Each Receipt this Period  
 140.00  
 Payroll contribution per cycle \$10.00

**B. Omar Padilla**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address emp xx6312  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of California Occupation employee  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **270.00**

Date of Receipt  
 12 / 31 / 2011  
**Transaction ID : SA11Al.12163**  
 Amount of Each Receipt this Period  
 140.00  
 Payroll contribution per cycle \$10.00

**C. Edith Parker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address emp xx8223  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of California Occupation employee  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **270.00**

Date of Receipt  
 12 / 31 / 2011  
**Transaction ID : SA11Al.12165**  
 Amount of Each Receipt this Period  
 140.00  
 Payroll contribution per cycle \$10.00

**SUBTOTAL** of Receipts This Page (optional)..... **420.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Jeffrey Passaro**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx8615  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
405.00

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12166**

Amount of Each Receipt this Period  
210.00

Payroll contribution per cycle \$15.00

**B. Perri Perrin**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx8823  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12170**

Amount of Each Receipt this Period  
140.00

Payroll contribution per cycle \$10.00

**C. Pamela Pisarczyk**  
Full Name (Last, First, Middle Initial)

Mailing Address Employee #xx2841  
50 Beale St.,

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of CA Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
405.00

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12174**

Amount of Each Receipt this Period  
210.00

Payroll contribution per cycle \$15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 560.00

**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 52 OF 86
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Paul Poon</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12175</b>
Mailing Address Employee #xx6412 50 Beale Street		Amount of Each Receipt this Period 350.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$25.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

Full Name (Last, First, Middle Initial) <b>B. Harry Potter</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12176</b>
Mailing Address Employee #xx7732 50 Beale Street		Amount of Each Receipt this Period 894.88
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$63.92
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1713.94	

Full Name (Last, First, Middle Initial) <b>C. David Prather</b>		Date of Receipt 12 / 01 / 2011 <b>Transaction ID : SA11AI.12177</b>
Mailing Address emp xx5817 50 Beale Street		Amount of Each Receipt this Period 140.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$10.00
Name of Employer Blue Shield of California	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1384.88
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 OF 86
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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 POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Diana Rae</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12180</b>
Mailing Address Employee #xx5295 50 Beale Street		Amount of Each Receipt this Period 157.50
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$11.25
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 303.75	

Full Name (Last, First, Middle Initial) <b>B. Alice Raia</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12181</b>
Mailing Address Employee# xx7898 50 Beale Street		Amount of Each Receipt this Period 280.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$40.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) <b>C. Joseph Ramey</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12183</b>
Mailing Address Employee #xx1935 50 Beale St.,		Amount of Each Receipt this Period 140.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$10.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	577.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Eric Rasmussen**  
Full Name (Last, First, Middle Initial)

Mailing Address 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11Al.12184**

Amount of Each Receipt this Period  
**140.00**

Payroll contribution per cycle \$10.00

**B. Kimberley Reed**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx9736  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **755.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11Al.12185**

Amount of Each Receipt this Period  
**430.00**

Payroll contribution per cycle \$35.00

**C. Kenneth Reid**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx2508  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11Al.12186**

Amount of Each Receipt this Period  
**140.00**

Payroll contribution per cycle \$10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **710.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Anurang Revri</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12187</b>
Mailing Address Employee #xx4019 50 Beale Street		Amount of Each Receipt this Period 600.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$50.00	
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 925.00	

Full Name (Last, First, Middle Initial) <b>B. Kathy Richards</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12188</b>
Mailing Address emp xx9053 50 Beale Street		Amount of Each Receipt this Period 700.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$50.00	
Name of Employer Blue Shield of California	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

Full Name (Last, First, Middle Initial) <b>C. Karen Rinaldi</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12191</b>
Mailing Address emp xx1645 50 Beale Street		Amount of Each Receipt this Period 188.65
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$13.35	
Name of Employer Blue Shield of California	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 362.15	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1488.65
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

**A. Thad Roake**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of California Occupation employee # xx5536  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1692.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12192**  
 Amount of Each Receipt this Period 877.52  
 Payroll contribution per cycle \$62.68

**B. Julie Roberts**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of California Occupation employee # xx3789  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12193**  
 Amount of Each Receipt this Period 320.00  
 Payroll contribution per cycle \$25.00

**C. Brett Robinson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Employee #xx7680  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of CA Occupation Employee  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12194**  
 Amount of Each Receipt this Period 255.00  
 Payroll contribution per cycle \$20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1452.52
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Norvita Robinson</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12195</b>
Mailing Address emp xx1723, 50 Beale Street		Amount of Each Receipt this Period 350.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$25.00
Name of Employer Blue Shield	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

Full Name (Last, First, Middle Initial) <b>B. Robert Rodgers</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12196</b>
Mailing Address Employee #xx7042 50 Beale St.,		Amount of Each Receipt this Period 420.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$35.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 745.00	

Full Name (Last, First, Middle Initial) <b>c. Martha Saafir</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12201</b>
Mailing Address 50 Beale Street		Amount of Each Receipt this Period 140.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$10.00
Name of Employer Blue Shield of California	Occupation employee # xx5645	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	910.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)  
**A. Mark Sachs**

Mailing Address 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation employee # xx4287

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12202**

Amount of Each Receipt this Period  
**210.00**

Payroll contribution per cycle \$15.00

Full Name (Last, First, Middle Initial)  
**B. Joseph Safran**

Mailing Address emp xx9164, 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield Occupation employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12203**

Amount of Each Receipt this Period  
**280.00**

Payroll contribution per cycle \$20.00

Full Name (Last, First, Middle Initial)  
**C. Alama Salim**

Mailing Address Employee# xx6125  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of CA Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.11938**

Amount of Each Receipt this Period  
**525.00**

Payroll contribution per cycle \$50

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **1015.00**

**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 59 OF 86  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Richard Salow**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of California Occupation employee # xx5516  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **848.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12206**  
 Amount of Each Receipt this Period  
**448.00**  
 Payroll contribution per cycle \$32.00

**B. Lauri Satterwhaite**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address emp xx9223  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of California Occupation Employee  
 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  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12207**  
 Amount of Each Receipt this Period  
**220.00**  
 Payroll contribution per cycle \$20.00

**C. Gary Sears**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Employee# xx7666  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of CA Occupation Employee  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12208**  
 Amount of Each Receipt this Period  
**300.00**  
 Payroll contribution per cycle \$25.00

**SUBTOTAL** of Receipts This Page (optional)..... **968.00**  
**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 60 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Stephen Shivinsky**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Employee# xx8369  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of CA Occupation Employee  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12212**  
 Amount of Each Receipt this Period  
 360.00  
 Payroll contribution per cycle \$40.00

**B. Jason Sims**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of California Occupation employee # xx2432  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12216**  
 Amount of Each Receipt this Period  
 210.00  
 Payroll contribution per cycle \$15.00

**C. Alan Smit**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Employee #xx6267  
 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of CA Occupation Employee  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1080.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12217**  
 Amount of Each Receipt this Period  
 560.00  
 Payroll contribution per cycle \$40.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1130.00  
**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 61 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Deborah Smith</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12218</b>
Mailing Address 50 Beale Street		Amount of Each Receipt this Period 231.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$16.50	
Name of Employer Blue Shield of California	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 445.50	

Full Name (Last, First, Middle Initial) <b>B. Kathleen Solorio</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12222</b>
Mailing Address emp xx2408 50 Beale Street		Amount of Each Receipt this Period 140.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00	
Name of Employer Blue Shield of California	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>C. Richard Soto</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12223</b>
Mailing Address Employee #xx3026 50 Beale St.,		Amount of Each Receipt this Period 140.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00	
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	511.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Robert Spector</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12224</b>
Mailing Address emp xx4420, 50 Beale Street		Amount of Each Receipt this Period 415.82
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$36.78
Name of Employer Blue Shield	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 756.96	

Full Name (Last, First, Middle Initial) <b>B. Catherine Spicer</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12227</b>
Mailing Address Employee #xx1303 50 Beale St.,		Amount of Each Receipt this Period 140.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$10.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>C. Nancy Stalker</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12228</b>
Mailing Address emp xx6479 50 Beale Street		Amount of Each Receipt this Period 420.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$30.00
Name of Employer Blue Shield of California	Occupation Vice President, Pharmacy Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 810.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	975.82
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Robert F. Stephenson</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12229</b>
Mailing Address emp xx2257 50 Beale Street		Amount of Each Receipt this Period 140.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00	
Name of Employer Blue Shield of California	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>B. Susan Stephenson</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12230</b>
Mailing Address emp xx9942, 50 Beale Street		Amount of Each Receipt this Period 140.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$10.00	
Name of Employer Blue Shield	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>c. Mary C StJohn</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12232</b>
Mailing Address 50 Beale St		Amount of Each Receipt this Period 390.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Payroll contribution per cycle \$30.00	
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 715.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	670.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 64 OF 86
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Kimberly Streit</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2011
Mailing Address emp xx5254 50 Beale Street		<b>Transaction ID : SA11AI.12233</b>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 325.00	
Name of Employer Blue Shield of California	Occupation employee	Payroll contribution per cycle \$25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) <b>B. Malcolm Strohson Jr.</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2011
Mailing Address 50 Beale Street		<b>Transaction ID : SA11AI.12234</b>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 327.00	
Name of Employer Blue Shield of California	Occupation employee # xx5599	Payroll contribution per cycle \$24.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 619.50	

Full Name (Last, First, Middle Initial) <b>C. Douglas Sturnick</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2011
Mailing Address emp xx1996 50 Beale Street		<b>Transaction ID : SA11AI.12235</b>
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 350.00	
Name of Employer Blue Shield of California	Occupation Employee	Payroll contribution per cycle \$25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1002.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Preddis Sullivan</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12236</b>
Mailing Address emp xx5476 50 Beale Street		Amount of Each Receipt this Period 350.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$25.00
Name of Employer Blue Shield of California	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

Full Name (Last, First, Middle Initial) <b>B. Lyle Swallow</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12287</b>
Mailing Address emp xx8612 50 Beale Street		Amount of Each Receipt this Period 300.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Manual Contribution
Name of Employer Blue Shield of California	Occupation Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1275.00	

Full Name (Last, First, Middle Initial) <b>C. Yvonne Tatsuno</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12242</b>
Mailing Address Employee #xx6843 50 Beale St.,		Amount of Each Receipt this Period 315.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$22.50
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 607.50	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	965.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 66 OF 86  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. James Taylor**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address emp xx2237, 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield Occupation employee  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12243**  
 Amount of Each Receipt this Period 140.00  
 Payroll contribution per cycle \$10.00

**B. Eric Terndrup**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address emp xx4199 50 Beale St.  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield of California Occupation Employee  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 838.33

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12244**  
 Amount of Each Receipt this Period 436.66  
 Payroll contribution per cycle \$31.19

**C. Ryan Thompson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address emp xx4592, 50 Beale Street  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blue Shield Occupation employee  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2011  
**Transaction ID : SA11AI.12246**  
 Amount of Each Receipt this Period 210.00  
 Payroll contribution per cycle \$15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 786.66  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 86
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Phyllis Thrush</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12249</b>
Mailing Address Employee #xx6787 50 Beale St.,		Amount of Each Receipt this Period 455.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$35.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 845.00	

Full Name (Last, First, Middle Initial) <b>B. Joanne Trenam</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12250</b>
Mailing Address emp xx0511, 50 Beale Street		Amount of Each Receipt this Period 140.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$10.00
Name of Employer Blue Shield	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>C. Christine Vogt-Wingerath</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12255</b>
Mailing Address Employee #xx7001 50 Beale St.,		Amount of Each Receipt this Period 210.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$15.00
Name of Employer Blue Shield of CA	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	805.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Sonya Wade</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12257</b>
Mailing Address emp xx3639 50 Beale Street		Amount of Each Receipt this Period 210.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$15.00
Name of Employer Blue Shield of California	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	

Full Name (Last, First, Middle Initial) <b>B. Robert Wadsworth</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12258</b>
Mailing Address emp x8560 50 Beale Street		Amount of Each Receipt this Period 420.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$30.00
Name of Employer Blue Shield of California	Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 810.00	

Full Name (Last, First, Middle Initial) <b>C. Diane Watts</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12262</b>
Mailing Address emp xx3379, 50 Beale Street		Amount of Each Receipt this Period 280.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Payroll contribution per cycle \$20.00
Name of Employer Blue Shield	Occupation employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	910.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Mark Weideman**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx4691  
50 Beale St

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield Occupation employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1620.00

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12263**

Amount of Each Receipt this Period  
840.00

Payroll contribution per cycle \$60.00

**B. Bonnie Wells**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx3298  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12264**

Amount of Each Receipt this Period  
135.00

Payroll contribution per cycle \$15.00

**C. Kim Westfall**  
Full Name (Last, First, Middle Initial)

Mailing Address emp xx5515  
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer Blue Shield of California Occupation employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
12 / 31 / 2011  
**Transaction ID : SA11AI.12266**

Amount of Each Receipt this Period  
140.00

Payroll contribution per cycle \$10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1115.00

**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 70 OF 86
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Jayne Whitelaw</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12267</b>
Mailing Address Employee #xx5978 50 Beale St., City San Francisco State CA Zip Code 94105		Amount of Each Receipt this Period 350.00 Payroll contribution per cycle \$25.00
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of CA Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

Full Name (Last, First, Middle Initial) <b>B. Evelyn Whitfield</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12268</b>
Mailing Address Employee #xx5718 50 Beale St., City San Francisco State CA Zip Code 94105		Amount of Each Receipt this Period 337.50 Payroll contribution per cycle \$22.50
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of CA Occupation Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 607.50	

Full Name (Last, First, Middle Initial) <b>C. Noel Whitman</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12269</b>
Mailing Address 50 Beale Street City San Francisco State CA Zip Code 94105		Amount of Each Receipt this Period 315.00 Payroll contribution per cycle \$22.50
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield fo California Occupation employee # xx4963	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 607.50	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1002.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 86
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Ms Janet D. Widmann</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12270</b>
Mailing Address emp xx1756 50 Beale Street		Amount of Each Receipt this Period 420.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of California	Occupation Employee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 810.00	Payroll contribution per cycle \$30.00

Full Name (Last, First, Middle Initial) <b>B. Amy Yao</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12282</b>
Mailing Address 50 Beale Street		Amount of Each Receipt this Period 420.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of California	Occupation employee #xx5363
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 810.00	Payroll contribution per cycle \$30.00

Full Name (Last, First, Middle Initial) <b>C. John Yao</b>		Date of Receipt 12 / 31 / 2011 <b>Transaction ID : SA11AI.12283</b>
Mailing Address emp 11926 50 Beale Street		Amount of Each Receipt this Period 315.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C	Name of Employer Blue Shield of California	Occupation Senior Medical Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	Payroll contribution per cycle \$22.50

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1155.00
<b>TOTAL</b> This Period (last page this line number only).....▶	65432.75

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

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

Full Name (Last, First, Middle Initial)

**A. Blue Shield of California**

Mailing Address 50 Beale Street

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
2009 Reimb.RE:the value of gift card that exceeds 1/3 the amount of the  
employee contribution  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 20 / 2011

**Transaction ID : SB21B.12291**

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

100.00

100.00



**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. ANNA ESHOO FOR CONGRESS**

Mailing Address 555 Capitol Mall Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**ANNA ESHOO FOR CONGRESS**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: CA District: 14

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2011

**Transaction ID : SB23.11880**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**B. BLUEPAC - BCBSA PAC**

Mailing Address 1310 G STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
2011 PAC Contribution

Candidate Name  
**BLUEPAC - BCBSA PAC**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2011

**Transaction ID : SB23.11878**

Amount of Each Disbursement this Period

12500.00

Full Name (Last, First, Middle Initial)

**C. BOB CORKER FOR SENATE 2012**

Mailing Address 1910 21ST AVENUE SOUTH

City NASHVILLE State TN Zip Code 37212

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**BOB CORKER FOR SENATE 2012**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: TN District: 00

Date of Disbursement

MM / DD / YYYY  
11 / 29 / 2011

**Transaction ID : SB23.11928**

Amount of Each Disbursement this Period

1000.00

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

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

16500.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : SB23.11928

This contribution was made in error and the check was never cashed. Stop payment is placed in January 2012 and it will be reported in the next FEC filing.

Form/Schedule:

Transaction ID:

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. BRIAN BILBRAY FOR CONGRESS**

Mailing Address 970 SEACOAST DRIVE  
# 7

City State Zip Code  
IMPERIAL BEACH CA 91932

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**BRIAN BILBRAY FOR CONGRESS**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  
 Other (specify) ▼  
State: CA District: 50

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	10	/	2011

Transaction ID : **SB23.11895**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. CONGRESSMAN WAXMAN CAMPAIGN COMMITTEE**

Mailing Address 8665 Wilshire Blvd. #220

City State Zip Code  
Beverly Hills CA 90211

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**CONGRESSMAN WAXMAN CAMPAIGN COMMITTEE**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  
 Other (specify) ▼  
State: CA District: 30

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	07	/	2011

Transaction ID : **SB23.11879**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**C. DAVE CAMP FOR CONGRESS 2010**

Mailing Address 5915 Eastman Avenue  
Suite 100

City State Zip Code  
Midland MI 48640

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**DAVE CAMP FOR CONGRESS 2010**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  
 Other (specify) ▼  
State: MI District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	22	/	2011

Transaction ID : **SB23.11916**

Amount of Each Disbursement this Period

2000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

5500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<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 POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DEMOCRATIC CONG. CAMPAIGN COMM.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2011

Mailing Address 430 South Capitol Street SE  
2nd Floor

**Transaction ID : SB23.11877**

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
2011 Contribution

Category/ Type
-------------------

Candidate Name

**DEMOCRATIC CONG. CAMPAIGN COMM.**

Office Sought:  House  
 Senate  
 President  
State: DC District: 00

Disbursement For: 2011  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. DENHAM FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2011

Mailing Address 2150 RIVER PLAZA DR #150

**Transaction ID : SB23.11883**

City SACRAMENTO State CA Zip Code 95833

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
2011 Primary Contribution

Category/ Type
-------------------

Candidate Name

**DENHAM FOR CONGRESS**

Office Sought:  House  
 Senate  
 President  
State: CA District: 19

Disbursement For: 2011  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. DENHAM FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		22		2011

Mailing Address 2150 RIVER PLAZA DR #150

**Transaction ID : SB23.11911**

City SACRAMENTO State CA Zip Code 95833

Amount of Each Disbursement this Period

2000.00
---------

Purpose of Disbursement  
2011 Primary Contribution

Category/ Type
-------------------

Candidate Name

**DENHAM FOR CONGRESS**

Office Sought:  House  
 Senate  
 President  
State: CA District: 19

Disbursement For: 2011  
 Primary  General  
 Other (specify) ▼

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

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

8000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<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 POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ENZI FOR US SENATE**

Mailing Address PO BOX 2775

City State Zip Code  
CODY WY 82414

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**MICHAEL B ENZI**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  
 Other (specify) ▼  
State: WY District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			20			2011					

**Transaction ID : SB23.11914**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF JOHN BARRASSO**

Mailing Address PO BOX 52008

City State Zip Code  
CASPER WY 82605

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**FRIENDS OF JOHN BARRASSO**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  
 Other (specify) ▼  
State: WY District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
09			15			2011					

**Transaction ID : SB23.11881**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF JOHN BARRASSO**

Mailing Address PO BOX 52008

City State Zip Code  
CASPER WY 82605

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**FRIENDS OF JOHN BARRASSO**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  
 Other (specify) ▼  
State: WY District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			22			2011					

**Transaction ID : SB23.11919**

Amount of Each Disbursement this Period

1000.00
---------

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

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

4000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<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 POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF JOHN THUNE**

Mailing Address 200 NORTH PHILLIPS AVENUE STE L101

City SIOUX FALLS State SD Zip Code 57104

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**JOHN THUNE**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: SD District: 00

Date of Disbursement

MM / DD / YYYY  
12 / 22 / 2011

Transaction ID : **SB23.11915**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF LOIS CAPP**

Mailing Address PO Box 23940

City Santa Barbara State CA Zip Code 93121

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**FRIENDS OF LOIS CAPP**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: CA District: 23

Date of Disbursement

MM / DD / YYYY  
09 / 27 / 2011

Transaction ID : **SB23.11888**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF MARK WARNER**

Mailing Address 1029 NORTH ROYAL STREET 2ND FL

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**FRIENDS OF MARK WARNER**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: VA District: 00

Date of Disbursement

MM / DD / YYYY  
11 / 10 / 2011

Transaction ID : **SB23.11893**

Amount of Each Disbursement this Period

1000.00

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

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

3500.00

**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)

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<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 POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JACKIE SPEIER FOR CONGRESS**

Mailing Address PO BOX 112

City BURLINGAME State CA Zip Code 94011

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**JACKIE SPEIER FOR CONGRESS**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: CA District: 12

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			22			2011					

Transaction ID : **SB23.11908**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. JOHN CAMPBELL FOR CONGRESS**

Mailing Address 4590 Macarthur Boulevard  
Suite 500

City Newport Beach State CA Zip Code 92660

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**JOHN CAMPBELL FOR CONGRESS**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: CA District: 48

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			22			2011					

Transaction ID : **SB23.11909**

Amount of Each Disbursement this Period

3000.00
---------

Full Name (Last, First, Middle Initial)

**C. KAINE FOR VIRGINIA**

Mailing Address 1515 CONFEDERATE AVE

City RICHMOND State VA Zip Code 23227

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**KAINE FOR VIRGINIA**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: VA District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			22			2011					

Transaction ID : **SB23.11904**

Amount of Each Disbursement this Period

1000.00
---------

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

6000.00
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. KAREN BASS FOR CONGRESS**

Mailing Address 777 S. Figueroa Street  
Suite 4050

City Los Angeles State CA Zip Code 90017

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**KAREN BASS FOR CONGRESS**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: CA District: 33

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		22		2011

**Transaction ID : SB23.11910**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. KEVIN MCCARTHY FOR CONGRESS**

Mailing Address 455 Capitol Mall Suite 801

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**KEVIN MCCARTHY FOR CONGRESS**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: CA District: 22

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2011

**Transaction ID : SB23.11923**

Amount of Each Disbursement this Period

4000.00
---------

Full Name (Last, First, Middle Initial)

**C. KEVIN MCCARTHY FOR CONGRESS**

Mailing Address 455 Capitol Mall Suite 801

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
2011 General Contribution

Candidate Name  
**KEVIN MCCARTHY FOR CONGRESS**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: CA District: 22

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2011

**Transaction ID : SB23.11925**

Amount of Each Disbursement this Period

2000.00
---------

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

7000.00
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. MENENDEZ FOR SENATE**

Mailing Address ONE GATEWAY CENTER SUITE 520

City NEWARK State NJ Zip Code 07102

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**MENENDEZ FOR SENATE**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: NJ District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		10		2011

Transaction ID : SB23.11899

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. MONTANANS FOR TESTER**

Mailing Address PO BOX 1135

City HELENA State MT Zip Code 59624

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**MONTANANS FOR TESTER**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: MT District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		10		2011

Transaction ID : SB23.11897

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. NANCY PELOSI FOR CONGRESS**

Mailing Address 235 Montgomery Street  
Suite 610

City San Francisco State CA Zip Code 94104

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**NANCY PELOSI FOR CONGRESS**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: CA District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2011

Transaction ID : SB23.11887

Amount of Each Disbursement this Period

5000.00
---------

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

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

7000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. NATIONAL REPUBLICAN SENATORIAL COMMITTEE**

Mailing Address 425 SECOND STREET NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
2011 Contribution

Candidate Name  
**NATIONAL REPUBLICAN SENATORIAL COMMITTEE**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 14 / 2011

**Transaction ID : SB23.11876**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. PETE STARK RE-ELECTION COMMITTEE**

Mailing Address P.O. Box 8331

City Fremont State CA Zip Code 94537

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**PETE STARK RE-ELECTION COMMITTEE**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: CA District: 13

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 22 / 2011

**Transaction ID : SB23.11907**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. RON CALDERON FOR CONGRESS**

Mailing Address 728 W EDNA PLACE

City COVINA State CA Zip Code 91722

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**RON CALDERON FOR CONGRESS**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: CA District: 37

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 31 / 2011

**Transaction ID : SB23.11889**

Amount of Each Disbursement this Period

2500.00

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

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

9500.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. Sam Farr for Congress**

Mailing Address 3422 Porter Street NW

City Washington State DC Zip Code 20016

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**Sam Farr for Congress**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2011

**Transaction ID : SB23.12297**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. SEARCHLIGHT LEADERSHIP FUND**

Mailing Address 426 C Street, NE  
Rear Building

City Washington State DC Zip Code 20002

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**SEARCHLIGHT LEADERSHIP FUND**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 22 / 2011

**Transaction ID : SB23.11906**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. SNOWE FOR SENATE**

Mailing Address PO BOX 2012

City PORTLAND State ME Zip Code 04104

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**SNOWE FOR SENATE**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: ME District: 00

Date of Disbursement

MM / DD / YYYY  
12 / 20 / 2011

**Transaction ID : SB23.11912**

Amount of Each Disbursement this Period

2000.00

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

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

5000.00

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

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(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. VARGAS FOR CONGRESS 2012**

Mailing Address 5429 MADISON AVE

City SACRAMENTO State CA Zip Code 95841

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**VARGAS FOR CONGRESS 2012**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: CA District: 51

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2011

Transaction ID : **SB23.11921**

Amount of Each Disbursement this Period

2500.00
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Full Name (Last, First, Middle Initial)

**B. WALLY HERGER FOR CONGRESS COMMITTEE**

Mailing Address PO Box 1007

City Willows State CA Zip Code 95988

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**WALLY HERGER FOR CONGRESS COMMITTEE**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: CA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2011

Transaction ID : **SB23.11917**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. WHITEHOUSE FOR SENATE**

Mailing Address P.O. BOX 40280

City PROVIDENCE State RI Zip Code 02940

Purpose of Disbursement  
2011 Primary Contribution

Candidate Name  
**WHITEHOUSE FOR SENATE**

Office Sought:  House  Senate  President  
Disbursement For: 2011  Primary  General  Other (specify) ▼  
State: RI District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	10	/	2011

Transaction ID : **SB23.11903**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

5500.00
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**TOTAL** This Period (last page this line number only)..... ▶

77500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Bank, Fees**

Mailing Address 345 Montgomery Street

City San Francisco State CA Zip Code 94101

Purpose of Disbursement  
Account analysis fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 15 / 2011

**Transaction ID : SB29.12299**

Amount of Each Disbursement this Period

62.83

Full Name (Last, First, Middle Initial)

**B. Bank, Fees**

Mailing Address 345 Montgomery Street

City San Francisco State CA Zip Code 94101

Purpose of Disbursement  
Account analysis fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 15 / 2011

**Transaction ID : SB29.12300**

Amount of Each Disbursement this Period

30.21

Full Name (Last, First, Middle Initial)

**C. Bank, Fees**

Mailing Address 345 Montgomery Street

City San Francisco State CA Zip Code 94101

Purpose of Disbursement  
Account analysis fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
09 / 15 / 2011

**Transaction ID : SB29.12301**

Amount of Each Disbursement this Period

28.68

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

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

121.72

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

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Detailed Summary Page

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

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

Full Name (Last, First, Middle Initial)

**A. Bank, Fees**

Mailing Address 345 Montgomery Street

City San Francisco State CA Zip Code 94101

Purpose of Disbursement  
Account analysis fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 17 / 2011

**Transaction ID : SB29.12302**

Amount of Each Disbursement this Period

65.44

Full Name (Last, First, Middle Initial)

**B. Bank, Fees**

Mailing Address 345 Montgomery Street

City San Francisco State CA Zip Code 94101

Purpose of Disbursement  
Account analysis fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
11 / 15 / 2011

**Transaction ID : SB29.12303**

Amount of Each Disbursement this Period

46.72

Full Name (Last, First, Middle Initial)

**C. Bank, Fees**

Mailing Address 345 Montgomery Street

City San Francisco State CA Zip Code 94101

Purpose of Disbursement  
Account analysis fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
12 / 15 / 2011

**Transaction ID : SB29.12304**

Amount of Each Disbursement this Period

47.54

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

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

159.70

281.42