

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

ADDRESS (number and street) P.O. Box 2291
 Check if different than previously reported. (ACC)
Durham NC 27702

2. **FEC IDENTIFICATION NUMBER** C00312223
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 04 01 2008 through 06 30 2008

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 Kenneth Wright

Signature of Treasurer Electronically Filed by Kenneth Wright Date 07 07 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		70275.08
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	41217.62									
(c) Total Receipts (from Line 19)	29863.52	62876.06								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	71081.14	133151.14								
7. Total Disbursements (from Line 31)	12250.00	74320.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	58831.14	58831.14								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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 Cross and Blue Shield of North Carolina Employee Political Action Committee

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	26516.09	44593.72
(i) Itemized (use Schedule A)	3347.43	18282.34
(ii) Unitemized	29863.52	62876.06
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	29863.52	62876.06
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	0.00
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 Transfer (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))	29863.52	62876.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	29863.52	62876.06

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	0.00	20.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	20.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	10500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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.....	12250.00	63800.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	12250.00	74320.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12250.00	74320.00

DETAILED SUMMARY PAGE
of Disbursements

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	29863.52	62876.06
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	29863.52	62876.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	20.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	20.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 137
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) H Jorgenia Abernathy		Date of Receipt MM / DD / YYYY 04 / 11 / 2008
Mailing Address		Transaction ID: SA11AI.67807
City State Zip Code		Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C	Occupation	
Name of Employer BCBSNC	Aggregate Year-to-Date ▼ 320.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) H Jorgenia Abernathy		Date of Receipt MM / DD / YYYY 04 / 25 / 2008
Mailing Address		Transaction ID: SA11AI.67977
City State Zip Code		Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C	Occupation	
Name of Employer BCBSNC	Aggregate Year-to-Date ▼ 360.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) H Jorgenia Abernathy		Date of Receipt MM / DD / YYYY 05 / 09 / 2008
Mailing Address		Transaction ID: SA11AI.68149
City State Zip Code		Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C	Occupation	
Name of Employer BCBSNC	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	120.00
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 7 / 137

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
H Jorgenia Abernathy

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer
BCBSNC

Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	0	8

Transaction ID: SA11AI.68318

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
H Jorgenia Abernathy

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer
BCBSNC

Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	0	8

Transaction ID: SA11AI.68502

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
H Jorgenia Abernathy

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer
BCBSNC

Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	1		2	0	0	8

Transaction ID: SA11AI.68670

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) 120.00

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 8 / 137
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Bradley Adcock

Mailing Address 106 Lindenthal Court

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 808.55

Date of Receipt: 04 / 11 / 2008
Transaction ID: SA11AI.67810
 Amount of Each Receipt this Period: 103.25

B.

Full Name (Last, First, Middle Initial)
Bradley Adcock

Mailing Address 106 Lindenthal Court

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 911.80

Date of Receipt: 04 / 25 / 2008
Transaction ID: SA11AI.67980
 Amount of Each Receipt this Period: 103.25

C.

Full Name (Last, First, Middle Initial)
Bradley Adcock

Mailing Address 106 Lindenthal Court

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1015.05

Date of Receipt: 05 / 09 / 2008
Transaction ID: SA11AI.68152
 Amount of Each Receipt this Period: 103.25

SUBTOTAL of Receipts This Page (optional) ► 309.75

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 9 / 137
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Bradley Adcock		Date of Receipt	
	Mailing Address 106 Lindenthal Court		M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68321
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		103.25	
Name of Employer BCBSNC		Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1118.30		

B.	Full Name (Last, First, Middle Initial) Bradley Adcock		Date of Receipt	
	Mailing Address 106 Lindenthal Court		M M / D D / Y Y Y Y Y 0 6 / 0 7 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68505
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		103.25	
Name of Employer BCBSNC		Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1221.55		

C.	Full Name (Last, First, Middle Initial) Bradley Adcock		Date of Receipt	
	Mailing Address 106 Lindenthal Court		M M / D D / Y Y Y Y Y 0 6 / 2 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68673
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		103.25	
Name of Employer BCBSNC		Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1324.80		

SUBTOTAL of Receipts This Page (optional)	▶	309.75
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 10 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

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

Mailing Address 5347 Yardley Terrace

City State Zip Code
Durham NC 27707

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

Name of Employer BCBSNC Occupation Assoc. General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 224.39

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.67981

Amount of Each Receipt this Period
25.61

B. Full Name (Last, First, Middle Initial)
William Alberti

Mailing Address 5347 Yardley Terrace

City State Zip Code
Durham NC 27707

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

Name of Employer BCBSNC Occupation Assoc. General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.68153

Amount of Each Receipt this Period
25.61

C. Full Name (Last, First, Middle Initial)
William Alberti

Mailing Address 5347 Yardley Terrace

City State Zip Code
Durham NC 27707

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

Name of Employer BCBSNC Occupation Assoc. General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.61

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.68322

Amount of Each Receipt this Period
25.61

SUBTOTAL of Receipts This Page (optional) ► 76.83

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 137
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
William Alberti

Mailing Address 5347 Yardley Terrace

City State Zip Code
Durham NC 27707

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

Name of Employer BCBSNC Occupation Assoc. General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.22

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.68506

Amount of Each Receipt this Period
25.61

B.

Full Name (Last, First, Middle Initial)
William Alberti

Mailing Address 5347 Yardley Terrace

City State Zip Code
Durham NC 27707

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

Name of Employer BCBSNC Occupation Assoc. General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 326.83

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.68674

Amount of Each Receipt this Period
25.61

C.

Full Name (Last, First, Middle Initial)
Daniel Atherton

Mailing Address 8800 Hatton Court

City State Zip Code
Charlotte NC 28277

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

Name of Employer BCBSNC Occupation Regional Sales Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.67984

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 76.22

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 12 / 137
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Daniel Atherton		Date of Receipt MM / DD / YYYY 05 / 09 / 2008
Mailing Address 8800 Hatton Court		Transaction ID: SA11AI.68156
City Charlotte	State NC	Zip Code 28277
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer BCBSNC	Occupation Regional Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Daniel Atherton		Date of Receipt MM / DD / YYYY 05 / 23 / 2008
Mailing Address 8800 Hatton Court		Transaction ID: SA11AI.68325
City Charlotte	State NC	Zip Code 28277
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer BCBSNC	Occupation Regional Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

C.

Full Name (Last, First, Middle Initial) Daniel Atherton		Date of Receipt MM / DD / YYYY 06 / 07 / 2008
Mailing Address 8800 Hatton Court		Transaction ID: SA11AI.68509
City Charlotte	State NC	Zip Code 28277
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer BCBSNC	Occupation Regional Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Daniel Atherton		Date of Receipt	
	Mailing Address 8800 Hatton Court		M M / D D / Y Y Y Y 06 / 21 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.68677
	Charlotte	NC	28277	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		25.00	
Name of Employer BCBSNC		Occupation Regional Sales Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00		

B.	Full Name (Last, First, Middle Initial) Gary Bolt		Date of Receipt	
	Mailing Address 4801 Highgate Drive		M M / D D / Y Y Y Y 04 / 11 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.67821
	Durham	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		59.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 445.35		

C.	Full Name (Last, First, Middle Initial) Gary Bolt		Date of Receipt	
	Mailing Address 4801 Highgate Drive		M M / D D / Y Y Y Y 04 / 25 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.67991
	Durham	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		59.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 504.35		

SUBTOTAL of Receipts This Page (optional)	▶	143.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Gary Bolt		Date of Receipt	
	Mailing Address 4801 Highgate Drive		M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68163
	Durham	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		59.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		563.35		

B.	Full Name (Last, First, Middle Initial) Gary Bolt		Date of Receipt	
	Mailing Address 4801 Highgate Drive		M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68332
	Durham	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		59.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		622.35		

C.	Full Name (Last, First, Middle Initial) Gary Bolt		Date of Receipt	
	Mailing Address 4801 Highgate Drive		M M / D D / Y Y Y Y Y 0 6 / 0 7 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68516
	Durham	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		59.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		681.35		

SUBTOTAL of Receipts This Page (optional)	▶	177.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 137
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Gary Bolt

Mailing Address 4801 Highgate Drive

City State Zip Code
Durham NC 27713

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
740.35

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.68684

Amount of Each Receipt this Period
59.00

B. Full Name (Last, First, Middle Initial)
W Don Bradley

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.67823

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
W Don Bradley

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.67993

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) ► **309.00**

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 16 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) W Don Bradley	Date of Receipt MM / DD / YYYY 05 / 09 / 2008
	Mailing Address	Transaction ID: SA11AI.68165
	City State Zip Code	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00

B.	Full Name (Last, First, Middle Initial) W Don Bradley	Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address	Transaction ID: SA11AI.68334
	City State Zip Code	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1375.00

C.	Full Name (Last, First, Middle Initial) W Don Bradley	Date of Receipt MM / DD / YYYY 06 / 07 / 2008
	Mailing Address	Transaction ID: SA11AI.68518
	City State Zip Code	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00

SUBTOTAL of Receipts This Page (optional)	375.00
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 17 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
W Don Bradley

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1625.00

Date of Receipt
MM / DD / YYYY
06 / 21 / 2008

Transaction ID: SA11AI.68686

Amount of Each Receipt this Period
125.00

B.

Full Name (Last, First, Middle Initial)
Cynthia Brenneman

Mailing Address 14 Steepleton Court

City State Zip Code
Hillsborough NC 27278

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 460.09

Date of Receipt
MM / DD / YYYY
04 / 11 / 2008

Transaction ID: SA11AI.67824

Amount of Each Receipt this Period
58.93

C.

Full Name (Last, First, Middle Initial)
Cynthia Brenneman

Mailing Address 14 Steepleton Court

City State Zip Code
Hillsborough NC 27278

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 519.02

Date of Receipt
MM / DD / YYYY
04 / 25 / 2008

Transaction ID: SA11AI.67994

Amount of Each Receipt this Period
58.93

SUBTOTAL of Receipts This Page (optional) ► 242.86

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Cynthia Brenneman

Mailing Address 14 Steepleton Court

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 577.95

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.68166

Amount of Each Receipt this Period
 58.93

B.

Full Name (Last, First, Middle Initial)
Cynthia Brenneman

Mailing Address 14 Steepleton Court

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 636.88

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.68335

Amount of Each Receipt this Period
 58.93

C.

Full Name (Last, First, Middle Initial)
Cynthia Brenneman

Mailing Address 14 Steepleton Court

City Hillsborough State NC Zip Code 27278

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 695.81

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.68519

Amount of Each Receipt this Period
 58.93

SUBTOTAL of Receipts This Page (optional) ► 176.79

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 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Cynthia Brenneman		Date of Receipt		
	Mailing Address 14 Steepleton Court		M M / D D / Y Y Y Y Y 06 / 21 / 2008		
	City Hillsborough	State NC	Zip Code 27278	Transaction ID: SA11AI.68687	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 58.93		
	Name of Employer BCBSNC	Occupation VP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Aggregate Year-to-Date ▼		754.74	

B.	Full Name (Last, First, Middle Initial) Milo Brunick		Date of Receipt		
	Mailing Address 4020 Grayson Ridge Court		M M / D D / Y Y Y Y Y 04 / 25 / 2008		
	City Raleigh	State NC	Zip Code 27613	Transaction ID: SA11AI.67996	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00		
	Name of Employer BCBSNC	Occupation VP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Aggregate Year-to-Date ▼		225.00	

C.	Full Name (Last, First, Middle Initial) Milo Brunick		Date of Receipt		
	Mailing Address 4020 Grayson Ridge Court		M M / D D / Y Y Y Y Y 05 / 09 / 2008		
	City Raleigh	State NC	Zip Code 27613	Transaction ID: SA11AI.68168	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00		
	Name of Employer BCBSNC	Occupation VP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Aggregate Year-to-Date ▼		250.00	

SUBTOTAL of Receipts This Page (optional)	▶	108.93
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 20 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City Raleigh State NC Zip Code 27613

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 05 / 23 / 2008
Transaction ID: SA11AI.68337
 Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City Raleigh State NC Zip Code 27613

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 07 / 2008
Transaction ID: SA11AI.68521
 Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial)
Milo Brunick

Mailing Address 4020 Grayson Ridge Court

City Raleigh State NC Zip Code 27613

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.14

Date of Receipt: 06 / 21 / 2008
Transaction ID: SA11AI.68689
 Amount of Each Receipt this Period: 85.14

SUBTOTAL of Receipts This Page (optional) ► 135.14

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 137

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
L Lisa Cade

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer
BCBSNC

Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
04 / 11 / 2008

Transaction ID: SA11AI.67829

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
L Lisa Cade

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer
BCBSNC

Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
04 / 25 / 2008

Transaction ID: SA11AI.67999

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
L Lisa Cade

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer
BCBSNC

Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
05 / 09 / 2008

Transaction ID: SA11AI.68171

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) 150.00

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 22 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) L Lisa Cade		Date of Receipt
Mailing Address		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code		05 / 23 / 2008
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.68340
Name of Employer BCBSNC		Amount of Each Receipt this Period
Occupation		<input type="text"/> 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text"/> 550.00

B.

Full Name (Last, First, Middle Initial) L Lisa Cade		Date of Receipt
Mailing Address		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code		06 / 07 / 2008
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.68524
Name of Employer BCBSNC		Amount of Each Receipt this Period
Occupation		<input type="text"/> 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text"/> 600.00

C.

Full Name (Last, First, Middle Initial) L Lisa Cade		Date of Receipt
Mailing Address		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code		06 / 21 / 2008
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.68692
Name of Employer BCBSNC		Amount of Each Receipt this Period
Occupation		<input type="text"/> 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text"/> 650.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 150.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Michele Cash		Date of Receipt	
	Mailing Address 8094 Grassy Creek Road		M M / D D / Y Y Y Y Y 0 4 / 1 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.67832
	Oxford	NC	27565	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		26.21	
Name of Employer BCBSNC		Occupation Senior Compensation Advisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 204.58		

B.	Full Name (Last, First, Middle Initial) Michele Cash		Date of Receipt	
	Mailing Address 8094 Grassy Creek Road		M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68002
	Oxford	NC	27565	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		26.21	
Name of Employer BCBSNC		Occupation Senior Compensation Advisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.79		

C.	Full Name (Last, First, Middle Initial) Michele Cash		Date of Receipt	
	Mailing Address 8094 Grassy Creek Road		M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68174
	Oxford	NC	27565	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		26.21	
Name of Employer BCBSNC		Occupation Senior Compensation Advisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 257.00		

SUBTOTAL of Receipts This Page (optional)	▶	78.63
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 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Michele Cash		Date of Receipt
	Mailing Address 8094 Grassy Creek Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 2 3 / 2 0 0 8
	City	State	Zip Code
	Oxford	NC	27565
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.68343
Name of Employer BCBSNC		Occupation Senior Compensation Advisor	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 283.21	<input type="text"/> 26.21

B.	Full Name (Last, First, Middle Initial) Michele Cash		Date of Receipt
	Mailing Address 8094 Grassy Creek Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 6 / 0 7 / 2 0 0 8
	City	State	Zip Code
	Oxford	NC	27565
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.68527
Name of Employer BCBSNC		Occupation Senior Compensation Advisor	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 309.42	<input type="text"/> 26.21

C.	Full Name (Last, First, Middle Initial) Michele Cash		Date of Receipt
	Mailing Address 8094 Grassy Creek Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 6 / 2 1 / 2 0 0 8
	City	State	Zip Code
	Oxford	NC	27565
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.68695
Name of Employer BCBSNC		Occupation Senior Compensation Advisor	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 335.63	<input type="text"/> 26.21

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 78.63
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Steven Cherrier		Date of Receipt MM / DD / YYYY 05 / 23 / 2008		
	Mailing Address 1207 Holly Creek Lane		Transaction ID: SA11AI.68345		
	City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

B.	Full Name (Last, First, Middle Initial) Steven Cherrier		Date of Receipt MM / DD / YYYY 06 / 07 / 2008		
	Mailing Address 1207 Holly Creek Lane		Transaction ID: SA11AI.68529		
	City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

C.	Full Name (Last, First, Middle Initial) Steven Cherrier		Date of Receipt MM / DD / YYYY 06 / 21 / 2008		
	Mailing Address 1207 Holly Creek Lane		Transaction ID: SA11AI.68697		
	City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

SUBTOTAL of Receipts This Page (optional)	▶	60.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Geoffrey Clasper		Date of Receipt	
	Mailing Address 708 Pinehurst Drive		M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.67835
	Chapel Hill	NC	27517	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		40.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		320.00		

B.	Full Name (Last, First, Middle Initial) Geoffrey Clasper		Date of Receipt	
	Mailing Address 708 Pinehurst Drive		M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68005
	Chapel Hill	NC	27517	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		40.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		360.00		

C.	Full Name (Last, First, Middle Initial) Geoffrey Clasper		Date of Receipt	
	Mailing Address 708 Pinehurst Drive		M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68177
	Chapel Hill	NC	27517	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		40.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		400.00		

SUBTOTAL of Receipts This Page (optional)	▶	120.00
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 27 / 137
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Geoffrey Clasper

Mailing Address 708 Pinehurst Drive

City State Zip Code
Chapel Hill NC 27517

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2008

Transaction ID: SA11AI.68346

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Geoffrey Clasper

Mailing Address 708 Pinehurst Drive

City State Zip Code
Chapel Hill NC 27517

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2008

Transaction ID: SA11AI.68530

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
Geoffrey Clasper

Mailing Address 708 Pinehurst Drive

City State Zip Code
Chapel Hill NC 27517

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt
MM / DD / YYYY
06 / 21 / 2008

Transaction ID: SA11AI.68698

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **120.00**

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 28 / 137

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

M Stephen Dean

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

217.27

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.67843

Amount of Each Receipt this Period

54.79

B.

Full Name (Last, First, Middle Initial)

M Stephen Dean

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

272.06

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.68013

Amount of Each Receipt this Period

54.79

C.

Full Name (Last, First, Middle Initial)

M Stephen Dean

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

326.85

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.68185

Amount of Each Receipt this Period

54.79

SUBTOTAL of Receipts This Page (optional) ▶

164.37

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 29 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) M Stephen Dean		Date of Receipt MM / DD / YYYY 05 / 23 / 2008
Mailing Address		Transaction ID: SA11AI.68354
City State Zip Code		Amount of Each Receipt this Period 54.79
FEC ID number of contributing federal political committee. C	Occupation	
Name of Employer BCBSNC	Aggregate Year-to-Date ▼ 381.64	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) M Stephen Dean		Date of Receipt MM / DD / YYYY 06 / 07 / 2008
Mailing Address		Transaction ID: SA11AI.68538
City State Zip Code		Amount of Each Receipt this Period 54.79
FEC ID number of contributing federal political committee. C	Occupation	
Name of Employer BCBSNC	Aggregate Year-to-Date ▼ 436.43	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) M Stephen Dean		Date of Receipt MM / DD / YYYY 06 / 21 / 2008
Mailing Address		Transaction ID: SA11AI.68706
City State Zip Code		Amount of Each Receipt this Period 54.79
FEC ID number of contributing federal political committee. C	Occupation	
Name of Employer BCBSNC	Aggregate Year-to-Date ▼ 491.22	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	164.37
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 30 / 137

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 413.70

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.67847

Amount of Each Receipt this Period

52.35

B.

Full Name (Last, First, Middle Initial)

Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 466.05

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.68019

Amount of Each Receipt this Period

52.35

C.

Full Name (Last, First, Middle Initial)

Lynn Duffy

Mailing Address 111 Suffolk Place

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer Occupation
BCBSNC VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 518.40

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.68190

Amount of Each Receipt this Period

52.35

SUBTOTAL of Receipts This Page (optional) ▶

157.05

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 / 137
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lynn Duffy	Date of Receipt
	Mailing Address 111 Suffolk Place	<input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>
	City State Zip Code Chapel Hill NC 27516	Transaction ID: SA11AI.68359
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="52.35"/>
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="570.75"/>	

B.	Full Name (Last, First, Middle Initial) Lynn Duffy	Date of Receipt
	Mailing Address 111 Suffolk Place	<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City State Zip Code Chapel Hill NC 27516	Transaction ID: SA11AI.68543
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="52.35"/>
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="623.10"/>	

C.	Full Name (Last, First, Middle Initial) Lynn Duffy	Date of Receipt
	Mailing Address 111 Suffolk Place	<input type="text" value="06"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City State Zip Code Chapel Hill NC 27516	Transaction ID: SA11AI.68711
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="52.35"/>
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="675.45"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="157.05"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) James Emmons		Date of Receipt
	Mailing Address 105 Vyne Court		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Cary	NC	27519
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.67850
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="602.59"/>	<input type="text" value="77.88"/>

B.	Full Name (Last, First, Middle Initial) James Emmons		Date of Receipt
	Mailing Address 105 Vyne Court		<input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Cary	NC	27519
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.68022
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="680.47"/>	<input type="text" value="77.88"/>

C.	Full Name (Last, First, Middle Initial) James Emmons		Date of Receipt
	Mailing Address 105 Vyne Court		<input type="text" value="05"/> / <input type="text" value="09"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Cary	NC	27519
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.68193
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="758.35"/>	<input type="text" value="77.88"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="233.64"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 137		
	<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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) James Emmons			Date of Receipt MM / DD / YYYY 05 / 23 / 2008		
	Mailing Address 105 Vyne Court			Transaction ID: SA11AI.68362		
	City Cary	State NC	Zip Code 27519	Amount of Each Receipt this Period 77.88		
	FEC ID number of contributing federal political committee. C					
	Name of Employer BCBSNC	Occupation VP		Aggregate Year-to-Date 836.23		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼						

B.	Full Name (Last, First, Middle Initial) James Emmons			Date of Receipt MM / DD / YYYY 06 / 07 / 2008		
	Mailing Address 105 Vyne Court			Transaction ID: SA11AI.68546		
	City Cary	State NC	Zip Code 27519	Amount of Each Receipt this Period 77.88		
	FEC ID number of contributing federal political committee. C					
	Name of Employer BCBSNC	Occupation VP		Aggregate Year-to-Date 914.11		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼						

C.	Full Name (Last, First, Middle Initial) James Emmons			Date of Receipt MM / DD / YYYY 06 / 21 / 2008		
	Mailing Address 105 Vyne Court			Transaction ID: SA11AI.68714		
	City Cary	State NC	Zip Code 27519	Amount of Each Receipt this Period 77.88		
	FEC ID number of contributing federal political committee. C					
	Name of Employer BCBSNC	Occupation VP		Aggregate Year-to-Date 991.99		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼						

SUBTOTAL of Receipts This Page (optional)	▶	233.64
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 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) M Robert Fleming	Date of Receipt
	Mailing Address	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 1 1 / 2 0 0 8
	City State Zip Code	Transaction ID: SA11AI.67851
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 51.20
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 400.95	

B.	Full Name (Last, First, Middle Initial) M Robert Fleming	Date of Receipt
	Mailing Address	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 2 5 / 2 0 0 8
	City State Zip Code	Transaction ID: SA11AI.68023
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 51.20
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 452.15	

C.	Full Name (Last, First, Middle Initial) M Robert Fleming	Date of Receipt
	Mailing Address	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 9 / 2 0 0 8
	City State Zip Code	Transaction ID: SA11AI.68194
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 51.20
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 503.35	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 153.60
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) M Robert Fleming	Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address	Transaction ID: SA11AI.68363
	City State Zip Code	Amount of Each Receipt this Period 51.20
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 554.55

B.	Full Name (Last, First, Middle Initial) M Robert Fleming	Date of Receipt MM / DD / YYYY 06 / 07 / 2008
	Mailing Address	Transaction ID: SA11AI.68547
	City State Zip Code	Amount of Each Receipt this Period 51.20
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 605.75

C.	Full Name (Last, First, Middle Initial) M Robert Fleming	Date of Receipt MM / DD / YYYY 06 / 21 / 2008
	Mailing Address	Transaction ID: SA11AI.68715
	City State Zip Code	Amount of Each Receipt this Period 51.20
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 656.95

SUBTOTAL of Receipts This Page (optional)	153.60
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 / 137
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.06

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.67852

Amount of Each Receipt this Period
105.17

B.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
930.23

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.68024

Amount of Each Receipt this Period
105.17

C.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1035.40

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.68195

Amount of Each Receipt this Period
105.17

SUBTOTAL of Receipts This Page (optional) ► **315.51**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1140.57

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	3	/	2	0	0	8

Transaction ID: SA11AI.68364

Amount of Each Receipt this Period
105.17

B.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1245.74

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	7	/	2	0	0	8

Transaction ID: SA11AI.68548

Amount of Each Receipt this Period
105.17

C.

Full Name (Last, First, Middle Initial)
John Friesen

Mailing Address 50009 Brogden

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.91

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	1	/	2	0	0	8

Transaction ID: SA11AI.68716

Amount of Each Receipt this Period
105.17

SUBTOTAL of Receipts This Page (optional) ► **315.51**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Celia Fuller		Date of Receipt MM / DD / YYYY 04 / 11 / 2008		
	Mailing Address 6114 Westglen Dr		Transaction ID: SA11AI.67853		
	City Raleigh	State NC	Zip Code 27612	Amount of Each Receipt this Period 40.62	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Resource/Technical Director			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 317.16			

B.	Full Name (Last, First, Middle Initial) Celia Fuller		Date of Receipt MM / DD / YYYY 04 / 25 / 2008		
	Mailing Address 6114 Westglen Dr		Transaction ID: SA11AI.68025		
	City Raleigh	State NC	Zip Code 27612	Amount of Each Receipt this Period 40.62	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Resource/Technical Director			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 357.78			

C.	Full Name (Last, First, Middle Initial) Celia Fuller		Date of Receipt MM / DD / YYYY 05 / 09 / 2008		
	Mailing Address 6114 Westglen Dr		Transaction ID: SA11AI.68196		
	City Raleigh	State NC	Zip Code 27612	Amount of Each Receipt this Period 40.62	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Resource/Technical Director			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 398.40			

SUBTOTAL of Receipts This Page (optional)	▶	121.86
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 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Celia Fuller		Date of Receipt MM / DD / YYYY 05 / 23 / 2008		
	Mailing Address 6114 Westglen Dr		Transaction ID: SA11AI.68365		
	City Raleigh	State NC	Zip Code 27612	Amount of Each Receipt this Period 40.62	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Resource/Technical Director			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 439.02			

B.	Full Name (Last, First, Middle Initial) Celia Fuller		Date of Receipt MM / DD / YYYY 06 / 07 / 2008		
	Mailing Address 6114 Westglen Dr		Transaction ID: SA11AI.68549		
	City Raleigh	State NC	Zip Code 27612	Amount of Each Receipt this Period 40.62	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Resource/Technical Director			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 479.64			

C.	Full Name (Last, First, Middle Initial) Celia Fuller		Date of Receipt MM / DD / YYYY 06 / 21 / 2008		
	Mailing Address 6114 Westglen Dr		Transaction ID: SA11AI.68717		
	City Raleigh	State NC	Zip Code 27612	Amount of Each Receipt this Period 40.62	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Resource/Technical Director			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.26			

SUBTOTAL of Receipts This Page (optional)	▶	121.86
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 40 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Kathi Gaines

Mailing Address 603 Kingswood Drive

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 396.73

Date of Receipt: 04 / 11 / 2008
Transaction ID: SA11AI.67854
 Amount of Each Receipt this Period: 50.51

B. Full Name (Last, First, Middle Initial)
Kathi Gaines

Mailing Address 603 Kingswood Drive

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 447.24

Date of Receipt: 04 / 25 / 2008
Transaction ID: SA11AI.68026
 Amount of Each Receipt this Period: 50.51

C. Full Name (Last, First, Middle Initial)
Kathi Gaines

Mailing Address 603 Kingswood Drive

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 497.75

Date of Receipt: 05 / 09 / 2008
Transaction ID: SA11AI.68197
 Amount of Each Receipt this Period: 50.51

SUBTOTAL of Receipts This Page (optional) ► 151.53

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 41 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kathi Gaines		Date of Receipt	
	Mailing Address 603 Kingswood Drive		M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68366
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.51	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 548.26		

B.	Full Name (Last, First, Middle Initial) Kathi Gaines		Date of Receipt	
	Mailing Address 603 Kingswood Drive		M M / D D / Y Y Y Y Y 0 6 / 0 7 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68550
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.51	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 598.77		

C.	Full Name (Last, First, Middle Initial) Kathi Gaines		Date of Receipt	
	Mailing Address 603 Kingswood Drive		M M / D D / Y Y Y Y Y 0 6 / 2 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68718
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.51	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 649.28		

SUBTOTAL of Receipts This Page (optional)	▶	151.53
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 42 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lynne Garrison		Date of Receipt
	Mailing Address 806 Green Passage Lane		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Apex	NC	27502
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer BCBSNC		Occupation VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="540.66"/>	Transaction ID: SA11AI.67856
		Amount of Each Receipt this Period	<input type="text" value="68.42"/>

B.	Full Name (Last, First, Middle Initial) Lynne Garrison		Date of Receipt
	Mailing Address 806 Green Passage Lane		<input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Apex	NC	27502
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer BCBSNC		Occupation VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="609.08"/>	Transaction ID: SA11AI.68028
		Amount of Each Receipt this Period	<input type="text" value="68.42"/>

C.	Full Name (Last, First, Middle Initial) Lynne Garrison		Date of Receipt
	Mailing Address 806 Green Passage Lane		<input type="text" value="05"/> / <input type="text" value="09"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Apex	NC	27502
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer BCBSNC		Occupation VP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="677.50"/>	Transaction ID: SA11AI.68199
		Amount of Each Receipt this Period	<input type="text" value="68.42"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="205.26"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Lynne Garrison

Mailing Address 806 Green Passage Lane

City State Zip Code
Apex NC 27502

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 745.92

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.68368

Amount of Each Receipt this Period
68.42

B.

Full Name (Last, First, Middle Initial)
Lynne Garrison

Mailing Address 806 Green Passage Lane

City State Zip Code
Apex NC 27502

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 814.34

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.68552

Amount of Each Receipt this Period
68.42

C.

Full Name (Last, First, Middle Initial)
Lynne Garrison

Mailing Address 806 Green Passage Lane

City State Zip Code
Apex NC 27502

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 882.76

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.68720

Amount of Each Receipt this Period
68.42

SUBTOTAL of Receipts This Page (optional) ► 205.26

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

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

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

FOR LINE NUMBER: PAGE 44 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
K Patrick Getzen
Mailing Address 205 Chilcott
City Apex State NC Zip Code 27502
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 516.77
Date of Receipt 04 / 11 / 2008
Transaction ID: SA11AI.67858
Amount of Each Receipt this Period 66.49

B. Full Name (Last, First, Middle Initial)
K Patrick Getzen
Mailing Address 205 Chilcott
City Apex State NC Zip Code 27502
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 583.26
Date of Receipt 04 / 25 / 2008
Transaction ID: SA11AI.68030
Amount of Each Receipt this Period 66.49

C. Full Name (Last, First, Middle Initial)
K Patrick Getzen
Mailing Address 205 Chilcott
City Apex State NC Zip Code 27502
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 649.75
Date of Receipt 05 / 09 / 2008
Transaction ID: SA11AI.68201
Amount of Each Receipt this Period 66.49

SUBTOTAL of Receipts This Page (optional) ► 199.47
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 45 / 137
<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) K Patrick Getzen		Date of Receipt	
	Mailing Address 205 Chilcott		M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68370
	Apex	NC	27502	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		66.49	
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		716.24		

B.	Full Name (Last, First, Middle Initial) K Patrick Getzen		Date of Receipt	
	Mailing Address 205 Chilcott		M M / D D / Y Y Y Y Y 0 6 / 0 7 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68554
	Apex	NC	27502	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		66.49	
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		782.73		

C.	Full Name (Last, First, Middle Initial) K Patrick Getzen		Date of Receipt	
	Mailing Address 205 Chilcott		M M / D D / Y Y Y Y Y 0 6 / 2 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68722
	Apex	NC	27502	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		66.49	
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		849.22		

SUBTOTAL of Receipts This Page (optional)	▶	199.47
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 46 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Daniel Glaser		Date of Receipt MM / DD / YYYY 04 / 11 / 2008	
Mailing Address 3613 Hathaway Road		Transaction ID: SA11AI.67859	
City Durham	State NC	Zip Code 27707	Amount of Each Receipt this Period 192.30
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1538.40		

B.

Full Name (Last, First, Middle Initial) Daniel Glaser		Date of Receipt MM / DD / YYYY 04 / 25 / 2008	
Mailing Address 3613 Hathaway Road		Transaction ID: SA11AI.68031	
City Durham	State NC	Zip Code 27707	Amount of Each Receipt this Period 192.30
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1730.70		

C.

Full Name (Last, First, Middle Initial) Daniel Glaser		Date of Receipt MM / DD / YYYY 05 / 09 / 2008	
Mailing Address 3613 Hathaway Road		Transaction ID: SA11AI.68202	
City Durham	State NC	Zip Code 27707	Amount of Each Receipt this Period 192.30
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1923.00		

SUBTOTAL of Receipts This Page (optional)	576.90
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 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Daniel Glaser		Date of Receipt	
	Mailing Address 3613 Hathaway Road		M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68371
	Durham	NC	27707	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2115.30		

B.	Full Name (Last, First, Middle Initial) Daniel Glaser		Date of Receipt	
	Mailing Address 3613 Hathaway Road		M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68555
	Durham	NC	27707	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2307.60		

C.	Full Name (Last, First, Middle Initial) Daniel Glaser		Date of Receipt	
	Mailing Address 3613 Hathaway Road		M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68723
	Durham	NC	27707	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2499.90		

SUBTOTAL of Receipts This Page (optional)	▶	576.90
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 48 / 137

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

K Ian Gordon

Mailing Address 100 Village Circle Way Apt337

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
SVP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

892.32

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.67861

Amount of Each Receipt this Period

111.54

B.

Full Name (Last, First, Middle Initial)

K Ian Gordon

Mailing Address 100 Village Circle Way Apt337

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
SVP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1003.86

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.68033

Amount of Each Receipt this Period

111.54

C.

Full Name (Last, First, Middle Initial)

K Ian Gordon

Mailing Address 100 Village Circle Way Apt337

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
SVP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1115.40

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.68204

Amount of Each Receipt this Period

111.54

SUBTOTAL of Receipts This Page (optional) ▶

334.62

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 49 / 137

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

K Ian Gordon

Mailing Address 100 Village Circle Way Apt337

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
SVP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1226.94

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.68373

Amount of Each Receipt this Period

111.54

B.

Full Name (Last, First, Middle Initial)

K Ian Gordon

Mailing Address 100 Village Circle Way Apt337

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
SVP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1338.48

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.68557

Amount of Each Receipt this Period

111.54

C.

Full Name (Last, First, Middle Initial)

K Ian Gordon

Mailing Address 100 Village Circle Way Apt337

City State Zip Code
Durham NC 27713

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation
SVP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1450.02

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.68725

Amount of Each Receipt this Period

111.54

SUBTOTAL of Receipts This Page (optional) ▶

334.62

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 50 / 137
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Laura Gorry		Date of Receipt MM / DD / YYYY 04 / 11 / 2008		
	Mailing Address 2566 Ironwood Drive		Transaction ID: SA11AI.67862		
	City Hickory	State NC	Zip Code 28602	Amount of Each Receipt this Period 33.65	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Regional Service Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 255.20			

B.	Full Name (Last, First, Middle Initial) Laura Gorry		Date of Receipt MM / DD / YYYY 04 / 25 / 2008		
	Mailing Address 2566 Ironwood Drive		Transaction ID: SA11AI.68034		
	City Hickory	State NC	Zip Code 28602	Amount of Each Receipt this Period 33.65	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Regional Service Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 288.85			

C.	Full Name (Last, First, Middle Initial) Laura Gorry		Date of Receipt MM / DD / YYYY 05 / 09 / 2008		
	Mailing Address 2566 Ironwood Drive		Transaction ID: SA11AI.68205		
	City Hickory	State NC	Zip Code 28602	Amount of Each Receipt this Period 33.65	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Regional Service Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 322.50			

SUBTOTAL of Receipts This Page (optional)	▶	100.95
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 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Laura Gorry	Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address 2566 Ironwood Drive	Transaction ID: SA11AI.68374
	City State Zip Code Hickory NC 28602	Amount of Each Receipt this Period 33.65
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Regional Service Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 356.15	

B.	Full Name (Last, First, Middle Initial) Laura Gorry	Date of Receipt MM / DD / YYYY 06 / 07 / 2008
	Mailing Address 2566 Ironwood Drive	Transaction ID: SA11AI.68558
	City State Zip Code Hickory NC 28602	Amount of Each Receipt this Period 33.65
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Regional Service Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 389.80	

C.	Full Name (Last, First, Middle Initial) Laura Gorry	Date of Receipt MM / DD / YYYY 06 / 21 / 2008
	Mailing Address 2566 Ironwood Drive	Transaction ID: SA11AI.68726
	City State Zip Code Hickory NC 28602	Amount of Each Receipt this Period 33.65
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Regional Service Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 423.45	

SUBTOTAL of Receipts This Page (optional)	▶	100.95
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 52 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Robert Greczyn

Mailing Address 113 Richelieu Dr.

City Cary State NC Zip Code 27511

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

Name of Employer BCBSNC Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1538.40

Date of Receipt: 04 / 11 / 2008
Transaction ID: SA11AI.67863
 Amount of Each Receipt this Period: 192.30

B.

Full Name (Last, First, Middle Initial)
Robert Greczyn

Mailing Address 113 Richelieu Dr.

City Cary State NC Zip Code 27511

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

Name of Employer BCBSNC Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1730.70

Date of Receipt: 04 / 25 / 2008
Transaction ID: SA11AI.68035
 Amount of Each Receipt this Period: 192.30

C.

Full Name (Last, First, Middle Initial)
Robert Greczyn

Mailing Address 113 Richelieu Dr.

City Cary State NC Zip Code 27511

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

Name of Employer BCBSNC Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1923.00

Date of Receipt: 05 / 09 / 2008
Transaction ID: SA11AI.68206
 Amount of Each Receipt this Period: 192.30

SUBTOTAL of Receipts This Page (optional) ► 576.90

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 53 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Robert Greczyn		Date of Receipt	
	Mailing Address 113 Richelieu Dr.		M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68375
	Cary	NC	27511	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
	Name of Employer BCBSNC		Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2115.30		

B.	Full Name (Last, First, Middle Initial) Robert Greczyn		Date of Receipt	
	Mailing Address 113 Richelieu Dr.		M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68559
	Cary	NC	27511	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
	Name of Employer BCBSNC		Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2307.60		

C.	Full Name (Last, First, Middle Initial) Robert Greczyn		Date of Receipt	
	Mailing Address 113 Richelieu Dr.		M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68727
	Cary	NC	27511	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
	Name of Employer BCBSNC		Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2499.90		

SUBTOTAL of Receipts This Page (optional)	▶	576.90
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 54 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Danny Gunselman

Mailing Address 3018 Annandale Road

City State Zip Code
Durham NC 27705

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
249.62

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.67865

Amount of Each Receipt this Period
31.84

B.

Full Name (Last, First, Middle Initial)
Danny Gunselman

Mailing Address 3018 Annandale Road

City State Zip Code
Durham NC 27705

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
281.46

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.68037

Amount of Each Receipt this Period
31.84

C.

Full Name (Last, First, Middle Initial)
Danny Gunselman

Mailing Address 3018 Annandale Road

City State Zip Code
Durham NC 27705

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
313.30

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.68208

Amount of Each Receipt this Period
31.84

SUBTOTAL of Receipts This Page (optional) ► **95.52**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Danny Gunselman		Date of Receipt	
	Mailing Address 3018 Annandale Road		M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68377
	Durham	NC	27705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		31.84	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		345.14		

B.	Full Name (Last, First, Middle Initial) Danny Gunselman		Date of Receipt	
	Mailing Address 3018 Annandale Road		M M / D D / Y Y Y Y Y 0 6 / 0 7 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68561
	Durham	NC	27705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		31.84	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		376.98		

C.	Full Name (Last, First, Middle Initial) Danny Gunselman		Date of Receipt	
	Mailing Address 3018 Annandale Road		M M / D D / Y Y Y Y Y 0 6 / 2 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68729
	Durham	NC	27705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		31.84	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		408.82		

SUBTOTAL of Receipts This Page (optional)	▶	95.52
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Sarah Hearn		Date of Receipt	
	Mailing Address 1181 Bowers Store Road		M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68383
	Siler City	NC	27344	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		19.46	
	Name of Employer BCBSNC	Occupation Manager	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		212.61		

B.	Full Name (Last, First, Middle Initial) Sarah Hearn		Date of Receipt	
	Mailing Address 1181 Bowers Store Road		M M / D D / Y Y Y Y Y 0 6 / 0 7 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68567
	Siler City	NC	27344	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		19.46	
	Name of Employer BCBSNC	Occupation Manager	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		232.07		

C.	Full Name (Last, First, Middle Initial) Sarah Hearn		Date of Receipt	
	Mailing Address 1181 Bowers Store Road		M M / D D / Y Y Y Y Y 0 6 / 2 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68735
	Siler City	NC	27344	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		19.46	
	Name of Employer BCBSNC	Occupation Manager	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		251.53		

SUBTOTAL of Receipts This Page (optional)	58.38
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 57 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms Susan Helm-Murtagh
 Mailing Address 117 Oldham Place
 City State Zip Code
 Chapel Hill NC 27516
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 1 1 / 2 0 0 8
Transaction ID: SA11AI.67872
 Amount of Each Receipt this Period
 67.31
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Resource Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 356.49

B. Full Name (Last, First, Middle Initial)
Ms Susan Helm-Murtagh
 Mailing Address 117 Oldham Place
 City State Zip Code
 Chapel Hill NC 27516
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 5 / 2 0 0 8
Transaction ID: SA11AI.68044
 Amount of Each Receipt this Period
 67.31
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Resource Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.80

C. Full Name (Last, First, Middle Initial)
Ms Susan Helm-Murtagh
 Mailing Address 117 Oldham Place
 City State Zip Code
 Chapel Hill NC 27516
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 9 / 2 0 0 8
Transaction ID: SA11AI.68215
 Amount of Each Receipt this Period
 67.31
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSNC Occupation Resource Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 491.11

SUBTOTAL of Receipts This Page (optional) ► 201.93
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Ms Susan Helm-Murtagh	Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address 117 Oldham Place	Transaction ID: SA11AI.68384
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 67.31
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Resource Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 558.42	

B.	Full Name (Last, First, Middle Initial) Ms Susan Helm-Murtagh	Date of Receipt MM / DD / YYYY 06 / 07 / 2008
	Mailing Address 117 Oldham Place	Transaction ID: SA11AI.68568
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 67.31
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Resource Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 625.73	

C.	Full Name (Last, First, Middle Initial) Ms Susan Helm-Murtagh	Date of Receipt MM / DD / YYYY 06 / 21 / 2008
	Mailing Address 117 Oldham Place	Transaction ID: SA11AI.68736
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 67.31
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Resource Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 693.04	

SUBTOTAL of Receipts This Page (optional)	▶	201.93
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms Kathryn Higgins

Mailing Address 734 Crabtree Crossing

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Sr. Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 05 / 09 / 2008
Transaction ID: SA11AI.68219
 Amount of Each Receipt this Period: 39.00

B. Full Name (Last, First, Middle Initial)
Ms Kathryn Higgins

Mailing Address 734 Crabtree Crossing

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Sr. Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 273.00

Date of Receipt: 05 / 23 / 2008
Transaction ID: SA11AI.68388
 Amount of Each Receipt this Period: 39.00

C. Full Name (Last, First, Middle Initial)
Ms Kathryn Higgins

Mailing Address 734 Crabtree Crossing

City Cary State NC Zip Code 27513

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

Name of Employer BCBSNC Occupation Sr. Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.00

Date of Receipt: 06 / 07 / 2008
Transaction ID: SA11AI.68572
 Amount of Each Receipt this Period: 39.00

SUBTOTAL of Receipts This Page (optional) ► 117.00

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 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Ms Kathryn Higgins	Date of Receipt MM / DD / YYYY 06 / 21 / 2008
	Mailing Address 734 Crabtree Crossing	Transaction ID: SA11AI.68740
	City State Zip Code Cary NC 27513	Amount of Each Receipt this Period 39.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation Sr. Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00	

B.	Full Name (Last, First, Middle Initial) L Terry Johnson	Date of Receipt MM / DD / YYYY 04 / 11 / 2008
	Mailing Address 203 E Aycock Street	Transaction ID: SA11AI.67882
	City State Zip Code Raleigh NC 27608	Amount of Each Receipt this Period 59.59
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 470.87	

C.	Full Name (Last, First, Middle Initial) L Terry Johnson	Date of Receipt MM / DD / YYYY 04 / 25 / 2008
	Mailing Address 203 E Aycock Street	Transaction ID: SA11AI.68054
	City State Zip Code Raleigh NC 27608	Amount of Each Receipt this Period 59.59
	FEC ID number of contributing federal political committee. C	
Name of Employer BCBSNC	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 530.46	

SUBTOTAL of Receipts This Page (optional)	158.18
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 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) L Terry Johnson	Date of Receipt MM / DD / YYYY 05 / 09 / 2008
	Mailing Address 203 E Aycok Street	Transaction ID: SA11AI.68225
	City Raleigh State NC Zip Code 27608	Amount of Each Receipt this Period 59.59
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 590.05	

B.	Full Name (Last, First, Middle Initial) L Terry Johnson	Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address 203 E Aycok Street	Transaction ID: SA11AI.68394
	City Raleigh State NC Zip Code 27608	Amount of Each Receipt this Period 59.59
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 649.64	

C.	Full Name (Last, First, Middle Initial) L Terry Johnson	Date of Receipt MM / DD / YYYY 06 / 07 / 2008
	Mailing Address 203 E Aycok Street	Transaction ID: SA11AI.68578
	City Raleigh State NC Zip Code 27608	Amount of Each Receipt this Period 59.59
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 709.23	

SUBTOTAL of Receipts This Page (optional)	178.77
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 62 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) L Terry Johnson	Date of Receipt MM / DD / YYYY 06 / 21 / 2008
	Mailing Address 203 E Aycok Street	Transaction ID: SA11AI.68746
	City Raleigh State NC Zip Code 27608	Amount of Each Receipt this Period 59.59
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 768.82	

B.	Full Name (Last, First, Middle Initial) Mr. James Kenley, Sr.	Date of Receipt MM / DD / YYYY 04 / 11 / 2008
	Mailing Address 4670 Elmhurst Drive NE	Transaction ID: SA11AI.67887
	City Hickory State NC Zip Code 28601	Amount of Each Receipt this Period 83.31
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 652.43	

C.	Full Name (Last, First, Middle Initial) Mr. James Kenley, Sr.	Date of Receipt MM / DD / YYYY 04 / 25 / 2008
	Mailing Address 4670 Elmhurst Drive NE	Transaction ID: SA11AI.68059
	City Hickory State NC Zip Code 28601	Amount of Each Receipt this Period 83.31
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 735.74	

SUBTOTAL of Receipts This Page (optional)	226.21
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 63 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. James Kenley, Sr.		Date of Receipt
	Mailing Address 4670 Elmhurst Drive NE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Hickory	NC	28601
	FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.68230
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 83.31
		<input type="text"/> 819.05	

B.	Full Name (Last, First, Middle Initial) Mr. James Kenley, Sr.		Date of Receipt
	Mailing Address 4670 Elmhurst Drive NE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Hickory	NC	28601
	FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.68398
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 83.31
		<input type="text"/> 902.36	

C.	Full Name (Last, First, Middle Initial) Mr. James Kenley, Sr.		Date of Receipt
	Mailing Address 4670 Elmhurst Drive NE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Hickory	NC	28601
	FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.68583
Name of Employer BCBSNC		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 83.31
		<input type="text"/> 985.67	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 249.93
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 64 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mr. James Kenley, Sr.

Mailing Address 4670 Elmhurst Drive NE

City State Zip Code
Hickory NC 28601

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1068.98

Date of Receipt
MM / DD / YYYY
06 / 21 / 2008

Transaction ID: SA11AI.68751

Amount of Each Receipt this Period
83.31

B.

Full Name (Last, First, Middle Initial)
M Eugenie Komives

Mailing Address 3518 Bluestone Ct.

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
726.56

Date of Receipt
MM / DD / YYYY
04 / 11 / 2008

Transaction ID: SA11AI.67889

Amount of Each Receipt this Period
92.97

C.

Full Name (Last, First, Middle Initial)
M Eugenie Komives

Mailing Address 3518 Bluestone Ct.

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
819.53

Date of Receipt
MM / DD / YYYY
04 / 25 / 2008

Transaction ID: SA11AI.68061

Amount of Each Receipt this Period
92.97

SUBTOTAL of Receipts This Page (optional) ► **269.25**

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 65 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) M Eugenie Komives		Date of Receipt	
	Mailing Address 3518 Bluestone Ct.		M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68232
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		92.97	
Name of Employer BCBSNC		Occupation Medical Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 912.50		

B.	Full Name (Last, First, Middle Initial) M Eugenie Komives		Date of Receipt	
	Mailing Address 3518 Bluestone Ct.		M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68400
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		92.97	
Name of Employer BCBSNC		Occupation Medical Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1005.47		

C.	Full Name (Last, First, Middle Initial) M Eugenie Komives		Date of Receipt	
	Mailing Address 3518 Bluestone Ct.		M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68585
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		92.97	
Name of Employer BCBSNC		Occupation Medical Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1098.44		

SUBTOTAL of Receipts This Page (optional)	▶	278.91
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 66 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) M Eugenie Komives	Date of Receipt
	Mailing Address 3518 Bluestone Ct.	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 21 / 2008
	City State Zip Code Chapel Hill NC 27514	Transaction ID: SA11AI.68753
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 92.97
	Name of Employer BCBSNC Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 1191.41	

B.	Full Name (Last, First, Middle Initial) Theresa Kroliczak	Date of Receipt
	Mailing Address	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 11 / 2008
	City State Zip Code	Transaction ID: SA11AI.67891
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 63.46
	Name of Employer BCBSNC Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 313.46	

C.	Full Name (Last, First, Middle Initial) Theresa Kroliczak	Date of Receipt
	Mailing Address	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 25 / 2008
	City State Zip Code	Transaction ID: SA11AI.68063
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 63.46
	Name of Employer BCBSNC Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 376.92	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 219.89
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 137
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Theresa Kroliczak

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.38

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.68234

Amount of Each Receipt this Period
63.46

B.

Full Name (Last, First, Middle Initial)
Theresa Kroliczak

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 503.84

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.68402

Amount of Each Receipt this Period
63.46

C.

Full Name (Last, First, Middle Initial)
Theresa Kroliczak

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 567.30

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.68587

Amount of Each Receipt this Period
63.46

SUBTOTAL of Receipts This Page (optional) ► **190.38**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Theresa Kroliczak	Date of Receipt MM / DD / YYYY 06 / 21 / 2008
	Mailing Address	Transaction ID: SA11AI.68755
	City State Zip Code	Amount of Each Receipt this Period 63.46
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.76

B.	Full Name (Last, First, Middle Initial) E George Lassiter	Date of Receipt MM / DD / YYYY 04 / 11 / 2008
	Mailing Address	Transaction ID: SA11AI.67892
	City State Zip Code	Amount of Each Receipt this Period 82.31
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 641.18

C.	Full Name (Last, First, Middle Initial) E George Lassiter	Date of Receipt MM / DD / YYYY 04 / 25 / 2008
	Mailing Address	Transaction ID: SA11AI.68064
	City State Zip Code	Amount of Each Receipt this Period 82.31
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 723.49

SUBTOTAL of Receipts This Page (optional)	228.08
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 69 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) E George Lassiter	Date of Receipt MM / DD / YYYY 05 / 09 / 2008
	Mailing Address	Transaction ID: SA11AI.68235
	City State Zip Code	Amount of Each Receipt this Period 82.31
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 805.80

B.	Full Name (Last, First, Middle Initial) E George Lassiter	Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address	Transaction ID: SA11AI.68403
	City State Zip Code	Amount of Each Receipt this Period 82.31
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 888.11

C.	Full Name (Last, First, Middle Initial) E George Lassiter	Date of Receipt MM / DD / YYYY 06 / 07 / 2008
	Mailing Address	Transaction ID: SA11AI.68588
	City State Zip Code	Amount of Each Receipt this Period 82.31
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 970.42

SUBTOTAL of Receipts This Page (optional)	246.93
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 137
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
E George Lassiter

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1052.73

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.68756

Amount of Each Receipt this Period
82.31

B.

Full Name (Last, First, Middle Initial)
Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation
Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.68065

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Dr. Dayna Lucas

Mailing Address 121 Breckenridge Pl

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation
Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.68236

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **132.31**

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 71 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Dr. Dayna Lucas		Date of Receipt
	Mailing Address 121 Breckenridge Pl		<input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.68404
Name of Employer BCBSNC		Occupation Medical Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="275.00"/>	<input type="text" value="25.00"/>

B.	Full Name (Last, First, Middle Initial) Dr. Dayna Lucas		Date of Receipt
	Mailing Address 121 Breckenridge Pl		<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.68589
Name of Employer BCBSNC		Occupation Medical Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	<input type="text" value="25.00"/>

C.	Full Name (Last, First, Middle Initial) Dr. Dayna Lucas		Date of Receipt
	Mailing Address 121 Breckenridge Pl		<input type="text" value="06"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Chapel Hill	NC	27514
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.68757
Name of Employer BCBSNC		Occupation Medical Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="325.00"/>	<input type="text" value="25.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 72 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Debra MacClennan		Date of Receipt	
	Mailing Address 400 Lakeshore Lane		M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.67895
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		76.94	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 615.52		

B.	Full Name (Last, First, Middle Initial) Debra MacClennan		Date of Receipt	
	Mailing Address 400 Lakeshore Lane		M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68067
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		76.94	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 692.46		

C.	Full Name (Last, First, Middle Initial) Debra MacClennan		Date of Receipt	
	Mailing Address 400 Lakeshore Lane		M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68238
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		76.94	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 769.40		

SUBTOTAL of Receipts This Page (optional)	▶	230.82
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 73 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Debra MacClennan		Date of Receipt	
	Mailing Address 400 Lakeshore Lane		M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68406
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		76.94	
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		846.34		

B.	Full Name (Last, First, Middle Initial) Debra MacClennan		Date of Receipt	
	Mailing Address 400 Lakeshore Lane		M M / D D / Y Y Y Y Y 0 6 / 0 7 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68591
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		76.94	
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		923.28		

C.	Full Name (Last, First, Middle Initial) Debra MacClennan		Date of Receipt	
	Mailing Address 400 Lakeshore Lane		M M / D D / Y Y Y Y Y 0 6 / 2 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68759
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		76.94	
	Name of Employer BCBSNC	Occupation VP	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		1000.22		

SUBTOTAL of Receipts This Page (optional)	▶	230.82
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 74 / 137
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Laurie Mace		Date of Receipt MM / DD / YYYY 06 / 07 / 2008		
	Mailing Address 105 Dutchess Lane		Transaction ID: SA11AI.68592		
	City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 18.02	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Project Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 213.99			

B.	Full Name (Last, First, Middle Initial) Laurie Mace		Date of Receipt MM / DD / YYYY 06 / 21 / 2008		
	Mailing Address 105 Dutchess Lane		Transaction ID: SA11AI.68760		
	City Chapel Hill	State NC	Zip Code 27514	Amount of Each Receipt this Period 18.02	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Project Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 232.01			

C.	Full Name (Last, First, Middle Initial) Joe McDowell		Date of Receipt MM / DD / YYYY 06 / 21 / 2008		
	Mailing Address 165 Farmington Road		Transaction ID: SA11AI.68762		
	City Grimesland	State NC	Zip Code 27837	Amount of Each Receipt this Period 16.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Regional Sales Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 208.00			

SUBTOTAL of Receipts This Page (optional)	▶	52.04
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 75 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lynn McNeal		Date of Receipt	
	Mailing Address 185 Swansea Lane		M M / D D / Y Y Y Y Y 0 4 / 1 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.67901
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		96.16	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		759.98		

B.	Full Name (Last, First, Middle Initial) Lynn McNeal		Date of Receipt	
	Mailing Address 185 Swansea Lane		M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68073
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		96.16	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		856.14		

C.	Full Name (Last, First, Middle Initial) Lynn McNeal		Date of Receipt	
	Mailing Address 185 Swansea Lane		M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68244
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		96.16	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		952.30		

SUBTOTAL of Receipts This Page (optional)	▶	288.48
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 76 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Lynn McNeal
Mailing Address 185 Swansea Lane
City Chapel Hill State NC Zip Code 27516
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1048.46
Date of Receipt 05 / 23 / 2008
Transaction ID: SA11AI.68412
Amount of Each Receipt this Period 96.16

B. Full Name (Last, First, Middle Initial)
Lynn McNeal
Mailing Address 185 Swansea Lane
City Chapel Hill State NC Zip Code 27516
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1144.62
Date of Receipt 06 / 07 / 2008
Transaction ID: SA11AI.68597
Amount of Each Receipt this Period 96.16

C. Full Name (Last, First, Middle Initial)
Lynn McNeal
Mailing Address 185 Swansea Lane
City Chapel Hill State NC Zip Code 27516
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSNC Occupation VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1240.78
Date of Receipt 06 / 21 / 2008
Transaction ID: SA11AI.68765
Amount of Each Receipt this Period 96.16

SUBTOTAL of Receipts This Page (optional) ► 288.48
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 77 / 137
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt	
	Mailing Address 105 Songbird Lane		M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68414
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		18.67	
Name of Employer BCBSNC		Occupation Sr. OD Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 202.67		

B.	Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt	
	Mailing Address 105 Songbird Lane		M M / D D / Y Y Y Y Y 0 6 / 0 7 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68599
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		18.67	
Name of Employer BCBSNC		Occupation Sr. OD Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 221.34		

C.	Full Name (Last, First, Middle Initial) Shirley Michl		Date of Receipt	
	Mailing Address 105 Songbird Lane		M M / D D / Y Y Y Y Y 0 6 / 2 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68767
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		18.67	
Name of Employer BCBSNC		Occupation Sr. OD Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.01		

SUBTOTAL of Receipts This Page (optional)	▶	56.01
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 78 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kathryn Millican		Date of Receipt	
	Mailing Address 1632 Lorraine Road		M M / D D / Y Y Y Y 06 / 07 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.68600
	Raleigh	NC	27607	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		18.99	
Name of Employer BCBSNC		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		214.92		

B.	Full Name (Last, First, Middle Initial) Kathryn Millican		Date of Receipt	
	Mailing Address 1632 Lorraine Road		M M / D D / Y Y Y Y 06 / 21 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.68768
	Raleigh	NC	27607	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		18.99	
Name of Employer BCBSNC		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		233.91		

C.	Full Name (Last, First, Middle Initial) J Heidi Musser		Date of Receipt	
	Mailing Address		M M / D D / Y Y Y Y 04 / 11 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.67907
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
			99.04	
Name of Employer BCBSNC		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		370.58		

SUBTOTAL of Receipts This Page (optional)	▶	137.02
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 79 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
J Heidi Musser

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 469.62

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.68079

Amount of Each Receipt this Period
99.04

B. Full Name (Last, First, Middle Initial)
J Heidi Musser

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 568.66

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.68250

Amount of Each Receipt this Period
99.04

C. Full Name (Last, First, Middle Initial)
J Heidi Musser

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 667.70

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.68418

Amount of Each Receipt this Period
99.04

SUBTOTAL of Receipts This Page (optional) ► 297.12

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 80 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
J Heidi Musser

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 766.74

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.68603

Amount of Each Receipt this Period
99.04

B.

Full Name (Last, First, Middle Initial)
J Heidi Musser

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 865.78

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.68771

Amount of Each Receipt this Period
99.04

C.

Full Name (Last, First, Middle Initial)
Maureen OConnor

Mailing Address 104 Beeston Ct.

City State Zip Code
Morrisville NC 27560

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

Name of Employer BCBSNC Occupation
SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1538.40

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.67911

Amount of Each Receipt this Period
192.30

SUBTOTAL of Receipts This Page (optional) ► **390.38**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Maureen OConnor		Date of Receipt	
	Mailing Address 104 Beeston Ct.		M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68083
	Morrisville	NC	27560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1730.70		

B.	Full Name (Last, First, Middle Initial) Maureen OConnor		Date of Receipt	
	Mailing Address 104 Beeston Ct.		M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68254
	Morrisville	NC	27560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1923.00		

C.	Full Name (Last, First, Middle Initial) Maureen OConnor		Date of Receipt	
	Mailing Address 104 Beeston Ct.		M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68422
	Morrisville	NC	27560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2115.30		

SUBTOTAL of Receipts This Page (optional)	▶	576.90
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 82 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Maureen OConnor		Date of Receipt	
	Mailing Address 104 Beeston Ct.		M M / D D / Y Y Y Y 06 / 07 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.68607
	Morrisville	NC	27560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2307.60		

B.	Full Name (Last, First, Middle Initial) Maureen OConnor		Date of Receipt	
	Mailing Address 104 Beeston Ct.		M M / D D / Y Y Y Y 06 / 21 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.68775
	Morrisville	NC	27560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2499.90		

C.	Full Name (Last, First, Middle Initial) James Owens		Date of Receipt	
	Mailing Address 12 Treadway Court		M M / D D / Y Y Y Y 04 / 11 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.67913
	Hillsborough	NC	27278	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		57.69	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		461.52		

SUBTOTAL of Receipts This Page (optional)	▶	442.29
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 83 / 137
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) James Owens		Date of Receipt	
	Mailing Address 12 Treadway Court		M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68085
	Hillsborough	NC	27278	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		57.69	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		519.21		

B.	Full Name (Last, First, Middle Initial) James Owens		Date of Receipt	
	Mailing Address 12 Treadway Court		M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68256
	Hillsborough	NC	27278	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		57.69	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		576.90		

C.	Full Name (Last, First, Middle Initial) James Owens		Date of Receipt	
	Mailing Address 12 Treadway Court		M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68424
	Hillsborough	NC	27278	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		57.69	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		634.59		

SUBTOTAL of Receipts This Page (optional)	173.07
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) James Owens		Date of Receipt MM / DD / YYYY 06 / 07 / 2008	
Mailing Address 12 Treadway Court		Transaction ID: SA11AI.68609	
City Hillsborough	State NC	Zip Code 27278	Amount of Each Receipt this Period 57.69
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 692.28		

B.

Full Name (Last, First, Middle Initial) James Owens		Date of Receipt MM / DD / YYYY 06 / 21 / 2008	
Mailing Address 12 Treadway Court		Transaction ID: SA11AI.68777	
City Hillsborough	State NC	Zip Code 27278	Amount of Each Receipt this Period 57.69
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 749.97		

C.

Full Name (Last, First, Middle Initial) Fara Palumbo		Date of Receipt MM / DD / YYYY 04 / 11 / 2008	
Mailing Address 1000 Gloucester Ct		Transaction ID: SA11AI.67915	
City Chapel Hill	State NC	Zip Code 27516	Amount of Each Receipt this Period 56.43
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 502.29		

SUBTOTAL of Receipts This Page (optional)	▶	171.81
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 85 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Fara Palumbo

Mailing Address 1000 Gloucester Ct

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
590.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.68087

Amount of Each Receipt this Period
87.93

B. Full Name (Last, First, Middle Initial)
Fara Palumbo

Mailing Address 1000 Gloucester Ct

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
692.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	9	/	2	0	0	8

Transaction ID: SA11AI.68258

Amount of Each Receipt this Period
101.92

C. Full Name (Last, First, Middle Initial)
Fara Palumbo

Mailing Address 1000 Gloucester Ct

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
764.26

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	3	/	2	0	0	8

Transaction ID: SA11AI.68426

Amount of Each Receipt this Period
72.12

SUBTOTAL of Receipts This Page (optional) ► **261.97**

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 86 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Fara Palumbo		Date of Receipt	
	Mailing Address 1000 Gloucester Ct		M M / D D / Y Y Y Y Y 06 / 07 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.68611
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		72.12	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 836.38		

B.	Full Name (Last, First, Middle Initial) Fara Palumbo		Date of Receipt	
	Mailing Address 1000 Gloucester Ct		M M / D D / Y Y Y Y Y 06 / 21 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.68779
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		72.12	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 908.50		

C.	Full Name (Last, First, Middle Initial) Michael J Parkerson		Date of Receipt	
	Mailing Address		M M / D D / Y Y Y Y Y 04 / 25 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.68089
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
	72.12			
Name of Employer BCBSNC		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional)	▶	169.24
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 87 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Michael J Parkerson	Date of Receipt MM / DD / YYYY 05 / 09 / 2008
	Mailing Address	Transaction ID: SA11AI.68260
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

B.	Full Name (Last, First, Middle Initial) Michael J Parkerson	Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address	Transaction ID: SA11AI.68428
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00

C.	Full Name (Last, First, Middle Initial) Michael J Parkerson	Date of Receipt MM / DD / YYYY 06 / 07 / 2008
	Mailing Address	Transaction ID: SA11AI.68613
	City State Zip Code	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

SUBTOTAL of Receipts This Page (optional)	75.00
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 88 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Michael J Parkerson		Date of Receipt MM / DD / YYYY 06 / 21 / 2008	
Mailing Address		Transaction ID: SA11AI.68781	
City State Zip Code		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

B.

Full Name (Last, First, Middle Initial) M David Patrick		Date of Receipt MM / DD / YYYY 04 / 11 / 2008	
Mailing Address		Transaction ID: SA11AI.67918	
City State Zip Code		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		

C.

Full Name (Last, First, Middle Initial) M David Patrick		Date of Receipt MM / DD / YYYY 04 / 25 / 2008	
Mailing Address		Transaction ID: SA11AI.68090	
City State Zip Code		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

SUBTOTAL of Receipts This Page (optional)	105.00
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 89 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
M David Patrick

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.68261

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
M David Patrick

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.68429

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
M David Patrick

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.68614

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **120.00**

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 90 / 137

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

M David Patrick

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

MM / DD / YYYY
06 / 21 / 2008

Transaction ID: SA11AI.68782

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Gerald Petkau

Mailing Address 402 Troycott Place

City

State

Zip Code

Cary

NC

27519

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation

VP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

759.45

Date of Receipt

MM / DD / YYYY
04 / 11 / 2008

Transaction ID: SA11AI.67921

Amount of Each Receipt this Period

128.45

C.

Full Name (Last, First, Middle Initial)

Gerald Petkau

Mailing Address 402 Troycott Place

City

State

Zip Code

Cary

NC

27519

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSNC

Occupation

VP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

887.90

Date of Receipt

MM / DD / YYYY
04 / 25 / 2008

Transaction ID: SA11AI.68093

Amount of Each Receipt this Period

128.45

SUBTOTAL of Receipts This Page (optional) ▶

296.90

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 91 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Gerald Petkau		Date of Receipt MM / DD / YYYY 05 / 09 / 2008	
Mailing Address 402 Troycott Place		Transaction ID: SA11AI.68264	
City Cary	State NC	Zip Code 27519	Amount of Each Receipt this Period 128.45
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1016.35		

B.

Full Name (Last, First, Middle Initial) Gerald Petkau		Date of Receipt MM / DD / YYYY 05 / 23 / 2008	
Mailing Address 402 Troycott Place		Transaction ID: SA11AI.68432	
City Cary	State NC	Zip Code 27519	Amount of Each Receipt this Period 128.45
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1144.80		

C.

Full Name (Last, First, Middle Initial) Gerald Petkau		Date of Receipt MM / DD / YYYY 06 / 07 / 2008	
Mailing Address 402 Troycott Place		Transaction ID: SA11AI.68617	
City Cary	State NC	Zip Code 27519	Amount of Each Receipt this Period 128.45
FEC ID number of contributing federal political committee. C			
Name of Employer BCBSNC	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1273.25		

SUBTOTAL of Receipts This Page (optional)	▶	385.35
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 92 / 137

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Gerald Petkau

Mailing Address 402 Troycott Place

City State Zip Code
Cary NC 27519

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

Name of Employer Occupation
BCBSNC VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1401.70

Date of Receipt

M M / D D / Y Y Y Y
06 / 21 / 2008

Transaction ID: SA11AI.68785

Amount of Each Receipt this Period

128.45

B.

Full Name (Last, First, Middle Initial)

Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City State Zip Code
Durham NC 27713

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

Name of Employer Occupation
BCBSNC Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
238.16

Date of Receipt

M M / D D / Y Y Y Y
04 / 11 / 2008

Transaction ID: SA11AI.67924

Amount of Each Receipt this Period

29.77

C.

Full Name (Last, First, Middle Initial)

Jocelyn Pickett

Mailing Address 203 Chancellor's Ridge

City State Zip Code
Durham NC 27713

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

Name of Employer Occupation
BCBSNC Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
267.93

Date of Receipt

M M / D D / Y Y Y Y
04 / 25 / 2008

Transaction ID: SA11AI.68096

Amount of Each Receipt this Period

29.77

SUBTOTAL of Receipts This Page (optional) ▶

187.99

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jocelyn Pickett		Date of Receipt	
	Mailing Address 203 Chancellor's Ridge		M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68267
	Durham	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		29.77	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		297.70		

B.	Full Name (Last, First, Middle Initial) Jocelyn Pickett		Date of Receipt	
	Mailing Address 203 Chancellor's Ridge		M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68435
	Durham	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		29.77	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		327.47		

C.	Full Name (Last, First, Middle Initial) Jocelyn Pickett		Date of Receipt	
	Mailing Address 203 Chancellor's Ridge		M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68620
	Durham	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		29.77	
Name of Employer BCBSNC		Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		357.24		

SUBTOTAL of Receipts This Page (optional)	▶	89.31
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 94 / 137						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jocelyn Pickett			Date of Receipt MM / DD / YYYY 06 / 21 / 2008		
	Mailing Address 203 Chancellor's Ridge			Transaction ID: SA11AI.68788		
	City	State	Zip Code	Amount of Each Receipt this Period		
	Durham	NC	27713	29.77		
	FEC ID number of contributing federal political committee. C					
Name of Employer BCBSNC		Occupation Director				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 387.01				

B.	Full Name (Last, First, Middle Initial) K Nathan Prather			Date of Receipt MM / DD / YYYY 04 / 11 / 2008		
	Mailing Address 319 Montibello Drive			Transaction ID: SA11AI.67929		
	City	State	Zip Code	Amount of Each Receipt this Period		
	Cary	NC	27513	30.00		
	FEC ID number of contributing federal political committee. C					
Name of Employer BCBSNC		Occupation				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00				

C.	Full Name (Last, First, Middle Initial) K Nathan Prather			Date of Receipt MM / DD / YYYY 04 / 25 / 2008		
	Mailing Address 319 Montibello Drive			Transaction ID: SA11AI.68101		
	City	State	Zip Code	Amount of Each Receipt this Period		
	Cary	NC	27513	30.00		
	FEC ID number of contributing federal political committee. C					
Name of Employer BCBSNC		Occupation				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00				

SUBTOTAL of Receipts This Page (optional)	▶	89.77
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 95 / 137						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) K Nathan Prather		Date of Receipt	
	Mailing Address 319 Montibello Drive		M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68272
	Cary	NC	27513	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		30.00		
Name of Employer BCBSNC		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

B.	Full Name (Last, First, Middle Initial) K Nathan Prather		Date of Receipt	
	Mailing Address 319 Montibello Drive		M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68439
	Cary	NC	27513	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		30.00		
Name of Employer BCBSNC		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 330.00		

C.	Full Name (Last, First, Middle Initial) K Nathan Prather		Date of Receipt	
	Mailing Address 319 Montibello Drive		M M / D D / Y Y Y Y Y 0 6 / 0 7 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68624
	Cary	NC	27513	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		30.00		
Name of Employer BCBSNC		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00		

SUBTOTAL of Receipts This Page (optional)	▶	90.00
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 97 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt MM / DD / YYYY 05 / 09 / 2008
Mailing Address 236 Coachlight Trail		Transaction ID: SA11AI.68275
City Burlington	State NC	Zip Code 27215
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.56
Name of Employer BCBSNC	Occupation Project Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 289.25	

B.

Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt MM / DD / YYYY 05 / 23 / 2008
Mailing Address 236 Coachlight Trail		Transaction ID: SA11AI.68442
City Burlington	State NC	Zip Code 27215
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.56
Name of Employer BCBSNC	Occupation Project Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 318.81	

C.

Full Name (Last, First, Middle Initial) Paul Reeves		Date of Receipt MM / DD / YYYY 06 / 07 / 2008
Mailing Address 236 Coachlight Trail		Transaction ID: SA11AI.68627
City Burlington	State NC	Zip Code 27215
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.56
Name of Employer BCBSNC	Occupation Project Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 348.37	

SUBTOTAL of Receipts This Page (optional)	▶	88.68
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 98 / 137
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Paul Reeves	Date of Receipt MM / DD / YYYY 06 / 21 / 2008
	Mailing Address 236 Coachlight Trail	Transaction ID: SA11AI.68795
	City State Zip Code Burlington NC 27215	Amount of Each Receipt this Period 29.56
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Project Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 377.93	

B.	Full Name (Last, First, Middle Initial) Mr. Harry Reynolds, Jr.	Date of Receipt MM / DD / YYYY 04 / 11 / 2008
	Mailing Address 1201 Summerville Lane	Transaction ID: SA11AI.67933
	City State Zip Code Durham NC 27712	Amount of Each Receipt this Period 81.04
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 633.52	

C.	Full Name (Last, First, Middle Initial) Mr. Harry Reynolds, Jr.	Date of Receipt MM / DD / YYYY 04 / 25 / 2008
	Mailing Address 1201 Summerville Lane	Transaction ID: SA11AI.68105
	City State Zip Code Durham NC 27712	Amount of Each Receipt this Period 81.04
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 714.56	

SUBTOTAL of Receipts This Page (optional)	191.64
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 99 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City State Zip Code
Durham NC 27712

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
795.60

Date of Receipt
MM / DD / YYYY
05 / 09 / 2008

Transaction ID: SA11AI.68276

Amount of Each Receipt this Period
81.04

B. Full Name (Last, First, Middle Initial)
Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City State Zip Code
Durham NC 27712

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
876.64

Date of Receipt
MM / DD / YYYY
05 / 23 / 2008

Transaction ID: SA11AI.68443

Amount of Each Receipt this Period
81.04

C. Full Name (Last, First, Middle Initial)
Mr. Harry Reynolds, Jr.

Mailing Address 1201 Summerville Lane

City State Zip Code
Durham NC 27712

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
957.68

Date of Receipt
MM / DD / YYYY
06 / 07 / 2008

Transaction ID: SA11AI.68628

Amount of Each Receipt this Period
81.04

SUBTOTAL of Receipts This Page (optional) ► **243.12**

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 101 / 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Daniel Risku	Date of Receipt MM / DD / YYYY 05 / 09 / 2008
	Mailing Address 105 San Miguel Place	Transaction ID: SA11AI.68278
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 101.53
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1008.30	

B.	Full Name (Last, First, Middle Initial) Mr. Daniel Risku	Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address 105 San Miguel Place	Transaction ID: SA11AI.68445
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 101.53
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1109.83	

C.	Full Name (Last, First, Middle Initial) Mr. Daniel Risku	Date of Receipt MM / DD / YYYY 06 / 07 / 2008
	Mailing Address 105 San Miguel Place	Transaction ID: SA11AI.68630
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 101.53
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1211.36	

SUBTOTAL of Receipts This Page (optional)	304.59
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Daniel Risku	Date of Receipt MM / DD / YYYY 06 / 21 / 2008
	Mailing Address 105 San Miguel Place	Transaction ID: SA11AI.68798
	City State Zip Code Chapel Hill NC 27514	Amount of Each Receipt this Period 101.53
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1312.89	

B.	Full Name (Last, First, Middle Initial) Mr. Michael Roach	Date of Receipt MM / DD / YYYY 04 / 11 / 2008
	Mailing Address 201 Woodleaf Dr	Transaction ID: SA11AI.67936
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 400.00	

C.	Full Name (Last, First, Middle Initial) Mr. Michael Roach	Date of Receipt MM / DD / YYYY 04 / 25 / 2008
	Mailing Address 201 Woodleaf Dr	Transaction ID: SA11AI.68108
	City State Zip Code Chapel Hill NC 27516	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 450.00	

SUBTOTAL of Receipts This Page (optional)	201.53
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 103 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mr. Michael Roach

Mailing Address 201 Woodleaf Dr

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 09 / 2008

Transaction ID: SA11AI.68279

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mr. Michael Roach

Mailing Address 201 Woodleaf Dr

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2008

Transaction ID: SA11AI.68446

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael Roach

Mailing Address 201 Woodleaf Dr

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2008

Transaction ID: SA11AI.68631

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **150.00**

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 104 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Michael Roach		Date of Receipt	
	Mailing Address 201 Woodleaf Dr		M M / D D / Y Y Y Y Y 06 / 21 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.68799
	Chapel Hill	NC	27516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		

B.	Full Name (Last, First, Middle Initial) Mr. John Roos		Date of Receipt	
	Mailing Address 119 Draymore Way		M M / D D / Y Y Y Y Y 04 / 11 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.67937
	Morrisville	NC	27560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1538.40		

C.	Full Name (Last, First, Middle Initial) Mr. John Roos		Date of Receipt	
	Mailing Address 119 Draymore Way		M M / D D / Y Y Y Y Y 04 / 25 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.68109
	Morrisville	NC	27560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
Name of Employer BCBSNC		Occupation SVP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1730.70		

SUBTOTAL of Receipts This Page (optional)	434.60
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 105 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. John Roos		Date of Receipt
	Mailing Address 119 Draymore Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 0 9 / 2 0 0 8
	City	State	Zip Code
	Morrisville	NC	27560
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.68280
Name of Employer BCBSNC		Occupation SVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 192.30

B.	Full Name (Last, First, Middle Initial) Mr. John Roos		Date of Receipt
	Mailing Address 119 Draymore Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 2 3 / 2 0 0 8
	City	State	Zip Code
	Morrisville	NC	27560
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.68447
Name of Employer BCBSNC		Occupation SVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 192.30

C.	Full Name (Last, First, Middle Initial) Mr. John Roos		Date of Receipt
	Mailing Address 119 Draymore Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 6 / 0 7 / 2 0 0 8
	City	State	Zip Code
	Morrisville	NC	27560
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.68632
Name of Employer BCBSNC		Occupation SVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 192.30

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 576.90
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 106 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. John Roos	Date of Receipt MM / DD / YYYY 06 / 21 / 2008
	Mailing Address 119 Draymore Way	Transaction ID: SA11AI.68800
	City State Zip Code Morrisville NC 27560	Amount of Each Receipt this Period 192.30
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2499.90	

B.	Full Name (Last, First, Middle Initial) V Tarsha Rowland	Date of Receipt MM / DD / YYYY 04 / 11 / 2008
	Mailing Address	Transaction ID: SA11AI.67938
	City State Zip Code	Amount of Each Receipt this Period 32.68
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 221.59	

C.	Full Name (Last, First, Middle Initial) V Tarsha Rowland	Date of Receipt MM / DD / YYYY 04 / 25 / 2008
	Mailing Address	Transaction ID: SA11AI.68110
	City State Zip Code	Amount of Each Receipt this Period 32.68
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 254.27	

SUBTOTAL of Receipts This Page (optional)	257.66
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: PAGE 107 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
V Tarsha Rowland

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 286.95

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.68281

Amount of Each Receipt this Period
 32.68

B. Full Name (Last, First, Middle Initial)
V Tarsha Rowland

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 319.63

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.68448

Amount of Each Receipt this Period
 32.68

C. Full Name (Last, First, Middle Initial)
V Tarsha Rowland

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 352.31

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.68633

Amount of Each Receipt this Period
 32.68

SUBTOTAL of Receipts This Page (optional) ► **98.04**

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 108 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) V Tarsha Rowland		Date of Receipt
	Mailing Address		<input type="text" value="06"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: SA11AI.68801
	Name of Employer BCBSNC		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="32.68"/>
		<input type="text" value="384.99"/>	

B.	Full Name (Last, First, Middle Initial) Mike Serozi		Date of Receipt
	Mailing Address 128 Lochwood Dr. West		<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: SA11AI.67942
	Name of Employer BCBSNC		Occupation Resource/Technical Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="45.12"/>
		<input type="text" value="353.76"/>	

C.	Full Name (Last, First, Middle Initial) Mike Serozi		Date of Receipt
	Mailing Address 128 Lochwood Dr. West		<input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: SA11AI.68114
	Name of Employer BCBSNC		Occupation Resource/Technical Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="45.12"/>
		<input type="text" value="398.88"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="122.92"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 109 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mike Serozi	Date of Receipt MM / DD / YYYY 05 / 09 / 2008
	Mailing Address 128 Lochwood Dr. West	Transaction ID: SA11AI.68284
	City Cary State NC Zip Code 27511	Amount of Each Receipt this Period 45.12
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Resource/Technical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 444.00	

B.	Full Name (Last, First, Middle Initial) Mike Serozi	Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address 128 Lochwood Dr. West	Transaction ID: SA11AI.68451
	City Cary State NC Zip Code 27511	Amount of Each Receipt this Period 45.12
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Resource/Technical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 489.12	

C.	Full Name (Last, First, Middle Initial) Mike Serozi	Date of Receipt MM / DD / YYYY 06 / 07 / 2008
	Mailing Address 128 Lochwood Dr. West	Transaction ID: SA11AI.68636
	City Cary State NC Zip Code 27511	Amount of Each Receipt this Period 45.12
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Resource/Technical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 534.24	

SUBTOTAL of Receipts This Page (optional)	135.36
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 110 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mike Serozi		Date of Receipt MM / DD / YYYY 06 / 21 / 2008		
	Mailing Address 128 Lochwood Dr. West		Transaction ID: SA11AI.68804		
	City Cary	State NC	Zip Code 27511	Amount of Each Receipt this Period 45.12	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation Resource/Technical Director	Aggregate Year-to-Date 579.36		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) E Ronald Smith		Date of Receipt MM / DD / YYYY 04 / 11 / 2008		
	Mailing Address		Transaction ID: SA11AI.67944		
	City	State	Zip Code	Amount of Each Receipt this Period 70.77	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation	Aggregate Year-to-Date 516.66		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) E Ronald Smith		Date of Receipt MM / DD / YYYY 04 / 25 / 2008		
	Mailing Address		Transaction ID: SA11AI.68116		
	City	State	Zip Code	Amount of Each Receipt this Period 70.77	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation	Aggregate Year-to-Date 587.43		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	▶	186.66
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: PAGE 111 / 137
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
E Ronald Smith

Mailing Address

City State Zip Code

Date of Receipt
MM / DD / YYYY
05 / 09 / 2008

Transaction ID: SA11AI.68286

Amount of Each Receipt this Period
70.77

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
658.20

B. Full Name (Last, First, Middle Initial)
E Ronald Smith

Mailing Address

City State Zip Code

Date of Receipt
MM / DD / YYYY
05 / 23 / 2008

Transaction ID: SA11AI.68453

Amount of Each Receipt this Period
70.77

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
728.97

C. Full Name (Last, First, Middle Initial)
E Ronald Smith

Mailing Address

City State Zip Code

Date of Receipt
MM / DD / YYYY
06 / 07 / 2008

Transaction ID: SA11AI.68638

Amount of Each Receipt this Period
70.77

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
799.74

SUBTOTAL of Receipts This Page (optional) ► **212.31**

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 112 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
E Ronald Smith

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 870.51

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.68806

Amount of Each Receipt this Period
70.77

B. Full Name (Last, First, Middle Initial)
William Smith

Mailing Address 303 Lynden Valley Court

City State Zip Code
Cary NC 27519

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.68455

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
William Smith

Mailing Address 303 Lynden Valley Court

City State Zip Code
Cary NC 27519

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.68640

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **110.77**

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 113 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) William Smith	Date of Receipt MM / DD / YYYY 06 / 21 / 2008
	Mailing Address 303 Lynden Valley Court	Transaction ID: SA11AI.68808
	City State Zip Code Cary NC 27519	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) John Sternbergh	Date of Receipt MM / DD / YYYY 04 / 11 / 2008
	Mailing Address 3726 St. Mark's Road	Transaction ID: SA11AI.67949
	City State Zip Code Durham * NC 27707	Amount of Each Receipt this Period 133.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1067.84	

C.	Full Name (Last, First, Middle Initial) John Sternbergh	Date of Receipt MM / DD / YYYY 04 / 25 / 2008
	Mailing Address 3726 St. Mark's Road	Transaction ID: SA11AI.68121
	City State Zip Code Durham * NC 27707	Amount of Each Receipt this Period 133.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1201.32	

SUBTOTAL of Receipts This Page (optional)	286.96
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 114 / 137
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
John Sternbergh

Mailing Address 3726 St. Mark's Road

City State Zip Code
Durham * NC 27707

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1334.80

Date of Receipt
MM / DD / YYYY
05 / 09 / 2008

Transaction ID: SA11AI.68290

Amount of Each Receipt this Period
133.48

B.

Full Name (Last, First, Middle Initial)
John Sternbergh

Mailing Address 3726 St. Mark's Road

City State Zip Code
Durham * NC 27707

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1414.89

Date of Receipt
MM / DD / YYYY
05 / 23 / 2008

Transaction ID: SA11AI.68457

Amount of Each Receipt this Period
80.09

C.

Full Name (Last, First, Middle Initial)
John Sternbergh

Mailing Address 3726 St. Mark's Road

City State Zip Code
Durham * NC 27707

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1548.37

Date of Receipt
MM / DD / YYYY
06 / 07 / 2008

Transaction ID: SA11AI.68642

Amount of Each Receipt this Period
133.48

SUBTOTAL of Receipts This Page (optional) ► **347.05**

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 115 / 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) John Sternbergh	Date of Receipt MM / DD / YYYY 06 / 21 / 2008
	Mailing Address 3726 St. Mark's Road	Transaction ID: SA11AI.68810
	City State Zip Code Durham * NC 27707	Amount of Each Receipt this Period 133.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation SVP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1681.85	

B.	Full Name (Last, First, Middle Initial) Richard Supinski	Date of Receipt MM / DD / YYYY 04 / 11 / 2008
	Mailing Address 2610 Lochmore Drive	Transaction ID: SA11AI.67956
	City State Zip Code Raleigh NC 27608	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Richard Supinski	Date of Receipt MM / DD / YYYY 04 / 25 / 2008
	Mailing Address 2610 Lochmore Drive	Transaction ID: SA11AI.68128
	City State Zip Code Raleigh NC 27608	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional)	193.48
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 116 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Richard Supinski
Mailing Address 2610 Lochmore Drive

City Raleigh State NC Zip Code 27608

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 05 / 09 / 2008
Transaction ID: SA11AI.68297
 Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial)
Richard Supinski
Mailing Address 2610 Lochmore Drive

City Raleigh State NC Zip Code 27608

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 05 / 23 / 2008
Transaction ID: SA11AI.68464
 Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
Richard Supinski
Mailing Address 2610 Lochmore Drive

City Raleigh State NC Zip Code 27608

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 06 / 07 / 2008
Transaction ID: SA11AI.68649
 Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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 117 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Richard Supinski

Mailing Address 2610 Lochmore Drive

City Raleigh State NC Zip Code 27608

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

Name of Employer BCBSNC Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 21 / 2008

Transaction ID: SA11AI.68817

Amount of Each Receipt this Period 30.00

B. Full Name (Last, First, Middle Initial)
Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City Chapel Hill State NC Zip Code 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 408.96

Date of Receipt 04 / 11 / 2008

Transaction ID: SA11AI.67957

Amount of Each Receipt this Period 52.07

C. Full Name (Last, First, Middle Initial)
Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City Chapel Hill State NC Zip Code 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 461.03

Date of Receipt 04 / 25 / 2008

Transaction ID: SA11AI.68129

Amount of Each Receipt this Period 52.07

SUBTOTAL of Receipts This Page (optional) ► 134.14

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 118 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
513.10

Date of Receipt
MM / DD / YYYY
05 / 09 / 2008

Transaction ID: SA11AI.68298

Amount of Each Receipt this Period
52.07

B.

Full Name (Last, First, Middle Initial)
Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
565.17

Date of Receipt
MM / DD / YYYY
05 / 23 / 2008

Transaction ID: SA11AI.68465

Amount of Each Receipt this Period
52.07

C.

Full Name (Last, First, Middle Initial)
Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
617.24

Date of Receipt
MM / DD / YYYY
06 / 07 / 2008

Transaction ID: SA11AI.68650

Amount of Each Receipt this Period
52.07

SUBTOTAL of Receipts This Page (optional) ► **156.21**

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 119 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mrs. Carol Sutton

Mailing Address 22101 Spring Meadow Dr.

City State Zip Code
Chapel Hill NC 27514

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

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
669.31

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	1	/	2	0	0	8

Transaction ID: SA11AI.68818

Amount of Each Receipt this Period
52.07

B. Full Name (Last, First, Middle Initial)
Robert Vavrina

Mailing Address 315 Northcreek Dr.

City State Zip Code
Durham NC 27707

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.67961

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Robert Vavrina

Mailing Address 315 Northcreek Dr.

City State Zip Code
Durham NC 27707

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.68133

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **252.07**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 120 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial) Robert Vavrina		Date of Receipt MM / DD / YYYY 05 / 09 / 2008
Mailing Address 315 Northcreek Dr.		Transaction ID: SA11AI.68302
City Durham	State NC	Zip Code 27707
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.

Full Name (Last, First, Middle Initial) Robert Vavrina		Date of Receipt MM / DD / YYYY 05 / 23 / 2008
Mailing Address 315 Northcreek Dr.		Transaction ID: SA11AI.68469
City Durham	State NC	Zip Code 27707
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

C.

Full Name (Last, First, Middle Initial) Robert Vavrina		Date of Receipt MM / DD / YYYY 06 / 07 / 2008
Mailing Address 315 Northcreek Dr.		Transaction ID: SA11AI.68654
City Durham	State NC	Zip Code 27707
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer BCBSNC	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional)	300.00
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 121 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Robert Vavrina

Mailing Address 315 Northcreek Dr.

City State Zip Code
Durham NC 27707

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

Name of Employer BCBSNC Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	1	/	2	0	0	8

Transaction ID: SA11AI.68822

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Jeanne Wallander

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.68136

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
Jeanne Wallander

Mailing Address

City State Zip Code

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

Name of Employer BCBSNC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	9	/	2	0	0	8

Transaction ID: SA11AI.68305

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **180.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 122 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jeanne Wallander		Date of Receipt MM / DD / YYYY 05 / 23 / 2008	
	Mailing Address		Transaction ID: SA11AI.68472	
	City	State	Zip Code	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 320.00	
Name of Employer BCBSNC		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

B.	Full Name (Last, First, Middle Initial) Jeanne Wallander		Date of Receipt MM / DD / YYYY 06 / 07 / 2008	
	Mailing Address		Transaction ID: SA11AI.68657	
	City	State	Zip Code	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 360.00	
Name of Employer BCBSNC		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

C.	Full Name (Last, First, Middle Initial) Jeanne Wallander		Date of Receipt MM / DD / YYYY 06 / 21 / 2008	
	Mailing Address		Transaction ID: SA11AI.68825	
	City	State	Zip Code	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 400.00	
Name of Employer BCBSNC		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

SUBTOTAL of Receipts This Page (optional)	▶	120.00
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 123 / 137
<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jason Weinstein		Date of Receipt		
	Mailing Address 1604 Foreman Street		M M / D D / Y Y Y Y Y 0 4 / 1 1 / 2 0 0 8		
	City Hillsborough	State NC	Zip Code 27278	Transaction ID: SA11AI.67967	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.29		
	Name of Employer BCBSNC	Occupation Resource Manager		Aggregate Year-to-Date 202.53	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Jason Weinstein		Date of Receipt		
	Mailing Address 1604 Foreman Street		M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 8		
	City Hillsborough	State NC	Zip Code 27278	Transaction ID: SA11AI.68139	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.29		
	Name of Employer BCBSNC	Occupation Resource Manager		Aggregate Year-to-Date 228.82	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Jason Weinstein		Date of Receipt		
	Mailing Address 1604 Foreman Street		M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 8		
	City Hillsborough	State NC	Zip Code 27278	Transaction ID: SA11AI.68308	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.29		
	Name of Employer BCBSNC	Occupation Resource Manager		Aggregate Year-to-Date 255.11	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	▶	78.87
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 124 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jason Weinstein	Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address 1604 Foreman Street	Transaction ID: SA11AI.68475
	City Hillsborough State NC Zip Code 27278	Amount of Each Receipt this Period 26.29
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Resource Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 281.40	

B.	Full Name (Last, First, Middle Initial) Jason Weinstein	Date of Receipt MM / DD / YYYY 06 / 07 / 2008
	Mailing Address 1604 Foreman Street	Transaction ID: SA11AI.68660
	City Hillsborough State NC Zip Code 27278	Amount of Each Receipt this Period 26.29
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Resource Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 307.69	

C.	Full Name (Last, First, Middle Initial) Jason Weinstein	Date of Receipt MM / DD / YYYY 06 / 21 / 2008
	Mailing Address 1604 Foreman Street	Transaction ID: SA11AI.68828
	City Hillsborough State NC Zip Code 27278	Amount of Each Receipt this Period 26.29
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Resource Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 333.98	

SUBTOTAL of Receipts This Page (optional)	▶	78.87
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 125 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jeffrey Weinstock			Date of Receipt MM / DD / YYYY 04 / 11 / 2008		
	Mailing Address 102 Tremont Circle			Transaction ID: SA11AI.67968		
	City State Zip Code Chapel Hill NC 27516			Amount of Each Receipt this Period 28.80		
	FEC ID number of contributing federal political committee. C					
	Name of Employer BCBSNC		Occupation Director			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.40			

B.	Full Name (Last, First, Middle Initial) Jeffrey Weinstock			Date of Receipt MM / DD / YYYY 04 / 25 / 2008		
	Mailing Address 102 Tremont Circle			Transaction ID: SA11AI.68140		
	City State Zip Code Chapel Hill NC 27516			Amount of Each Receipt this Period 28.80		
	FEC ID number of contributing federal political committee. C					
	Name of Employer BCBSNC		Occupation Director			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 259.20			

C.	Full Name (Last, First, Middle Initial) Jeffrey Weinstock			Date of Receipt MM / DD / YYYY 05 / 09 / 2008		
	Mailing Address 102 Tremont Circle			Transaction ID: SA11AI.68309		
	City State Zip Code Chapel Hill NC 27516			Amount of Each Receipt this Period 28.80		
	FEC ID number of contributing federal political committee. C					
	Name of Employer BCBSNC		Occupation Director			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 288.00			

SUBTOTAL of Receipts This Page (optional)	▶	86.40
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: PAGE 126 / 137

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Jeffrey Weinstock

Mailing Address 102 Tremont Circle

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer Occupation
BCBSNC Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 316.80

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.68476

Amount of Each Receipt this Period
28.80

B.

Full Name (Last, First, Middle Initial)

Jeffrey Weinstock

Mailing Address 102 Tremont Circle

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer Occupation
BCBSNC Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 345.60

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.68661

Amount of Each Receipt this Period
28.80

C.

Full Name (Last, First, Middle Initial)

Jeffrey Weinstock

Mailing Address 102 Tremont Circle

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer Occupation
BCBSNC Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 374.40

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.68829

Amount of Each Receipt this Period
28.80

SUBTOTAL of Receipts This Page (optional) ▶

86.40

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 127 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. James Wilson		Date of Receipt	
	Mailing Address 227 Midenhall Way		M M / D D / Y Y Y Y Y 0 4 / 1 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.67973
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
	Name of Employer BCBSNC		Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1538.40		

B.	Full Name (Last, First, Middle Initial) Mr. James Wilson		Date of Receipt	
	Mailing Address 227 Midenhall Way		M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68145
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
	Name of Employer BCBSNC		Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1730.70		

C.	Full Name (Last, First, Middle Initial) Mr. James Wilson		Date of Receipt	
	Mailing Address 227 Midenhall Way		M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68314
	Cary	NC	27513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		192.30	
	Name of Employer BCBSNC		Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1923.00		

SUBTOTAL of Receipts This Page (optional)	▶	576.90
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 128 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. James Wilson		Date of Receipt MM / DD / YYYY 05 / 23 / 2008		
	Mailing Address 227 Midenhall Way		Transaction ID: SA11AI.68481		
	City Cary	State NC	Zip Code 27513	Amount of Each Receipt this Period 192.30	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation SVP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2115.30			

B.	Full Name (Last, First, Middle Initial) Mr. James Wilson		Date of Receipt MM / DD / YYYY 06 / 07 / 2008		
	Mailing Address 227 Midenhall Way		Transaction ID: SA11AI.68666		
	City Cary	State NC	Zip Code 27513	Amount of Each Receipt this Period 192.30	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation SVP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2307.60			

C.	Full Name (Last, First, Middle Initial) Mr. James Wilson		Date of Receipt MM / DD / YYYY 06 / 21 / 2008		
	Mailing Address 227 Midenhall Way		Transaction ID: SA11AI.68834		
	City Cary	State NC	Zip Code 27513	Amount of Each Receipt this Period 192.30	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BCBSNC	Occupation SVP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2499.90			

SUBTOTAL of Receipts This Page (optional)	▶	576.90
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 129 / 137
	<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin		Date of Receipt	
	Mailing Address 100 Palmyra Place		M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.67974
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		88.35	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		680.65		

B.	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin		Date of Receipt	
	Mailing Address 100 Palmyra Place		M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68146
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		88.35	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		769.00		

C.	Full Name (Last, First, Middle Initial) Mr. Christopher Woodfin		Date of Receipt	
	Mailing Address 100 Palmyra Place		M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.68315
	Chapel Hill	NC	27514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		88.35	
Name of Employer BCBSNC		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		857.35		

SUBTOTAL of Receipts This Page (optional)	▶	265.05
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 130 / 137

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mr. Christopher Woodfin

Mailing Address 100 Palmyra Place

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. C

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 945.70

Date of Receipt MM / DD / YYYY
05 / 23 / 2008

Transaction ID: SA11AI.68482

Amount of Each Receipt this Period 88.35

B.

Full Name (Last, First, Middle Initial)
Mr. Christopher Woodfin

Mailing Address 100 Palmyra Place

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. C

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1034.05

Date of Receipt MM / DD / YYYY
06 / 07 / 2008

Transaction ID: SA11AI.68667

Amount of Each Receipt this Period 88.35

C.

Full Name (Last, First, Middle Initial)
Mr. Christopher Woodfin

Mailing Address 100 Palmyra Place

City State Zip Code
Chapel Hill NC 27514

FEC ID number of contributing federal political committee. C

Name of Employer BCBSNC Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1122.40

Date of Receipt MM / DD / YYYY
06 / 21 / 2008

Transaction ID: SA11AI.68835

Amount of Each Receipt this Period 88.35

SUBTOTAL of Receipts This Page (optional) 265.05

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 131 / 137
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kenneth Wright	Date of Receipt MM / DD / YYYY 04 / 11 / 2008
	Mailing Address 618 S. Wingate Dr.	Transaction ID: SA11AI.67975
	City State Zip Code Wake Forest NC 27587	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 293.20	

B.	Full Name (Last, First, Middle Initial) Kenneth Wright	Date of Receipt MM / DD / YYYY 04 / 25 / 2008
	Mailing Address 618 S. Wingate Dr.	Transaction ID: SA11AI.68147
	City State Zip Code Wake Forest NC 27587	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 331.20	

C.	Full Name (Last, First, Middle Initial) Kenneth Wright	Date of Receipt MM / DD / YYYY 05 / 09 / 2008
	Mailing Address 618 S. Wingate Dr.	Transaction ID: SA11AI.68316
	City State Zip Code Wake Forest NC 27587	Amount of Each Receipt this Period 38.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BCBSNC Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 369.20	

SUBTOTAL of Receipts This Page (optional)	114.00
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 132 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Kenneth Wright

Mailing Address 618 S. Wingate Dr.

City State Zip Code
Wake Forest NC 27587

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
407.20

Date of Receipt
MM / DD / YYYY
05 / 23 / 2008

Transaction ID: SA11AI.68483

Amount of Each Receipt this Period
38.00

B.

Full Name (Last, First, Middle Initial)
Kenneth Wright

Mailing Address 618 S. Wingate Dr.

City State Zip Code
Wake Forest NC 27587

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
445.20

Date of Receipt
MM / DD / YYYY
06 / 07 / 2008

Transaction ID: SA11AI.68668

Amount of Each Receipt this Period
38.00

C.

Full Name (Last, First, Middle Initial)
Kenneth Wright

Mailing Address 618 S. Wingate Dr.

City State Zip Code
Wake Forest NC 27587

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

Name of Employer BCBSNC Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
483.20

Date of Receipt
MM / DD / YYYY
06 / 21 / 2008

Transaction ID: SA11AI.68836

Amount of Each Receipt this Period
38.00

SUBTOTAL of Receipts This Page (optional) ► **114.00**

TOTAL This Period (last page this line number only) ► **26516.09**

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 133 / 137

<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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lorene Coates <hr/> Mailing Address 1345 Gheen Road <hr/> City Salisbury State NC Zip Code 27147 <hr/> Purpose of Disbursement contribution Candidate Name Lorene Coates Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.68500 Date of Disbursement 04 / 30 / 2008 <hr/> Amount of Each Disbursement this Period 750.00
B.	Full Name (Last, First, Middle Initial) Rep. Robert Grady <hr/> Mailing Address 107 Jean Circle <hr/> City Jacksonville State NC Zip Code 28540 <hr/> Purpose of Disbursement contribution Candidate Name Rep. Robert Grady Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.68486 Date of Disbursement 04 / 02 / 2008 <hr/> Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Joe Hackney <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement contribution returned Candidate Name Joe Hackney Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District: 54	Transaction ID: SB29.68492 Date of Disbursement 04 / 04 / 2008 <hr/> Amount of Each Disbursement this Period -2000.00

SUBTOTAL of Disbursements This Page (optional) ▶

-750.00

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

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"/> 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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Joe Hackney <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement contribution Candidate Name Joe Hackney <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 54 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.68493 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 8	Amount of Each Disbursement this Period 1500.00
B.	Full Name (Last, First, Middle Initial) Ty Harrell <hr/> Mailing Address P.O Box 27376 <hr/> City State Zip Code Raleigh NC 27611 <hr/> Purpose of Disbursement contribution Candidate Name Ty Harrell <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.68494 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 8	Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Rep. Daniel McComas <hr/> Mailing Address P.O. Box 2274 <hr/> City State Zip Code Wilmington NC 28402 <hr/> Purpose of Disbursement contribution Candidate Name Rep. Daniel McComas <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.68485 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 8	Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

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"/> 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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.	Full Name (Last, First, Middle Initial) Pat McCrory <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement contribution Candidate Name Pat McCrory <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.68497 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 4000.00
B.	Full Name (Last, First, Middle Initial) Bill McGee <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement contribution Candidate Name Bill McGee <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.68490 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Sen. Beverly Perdue <hr/> Mailing Address 211 Wilson Point Road <hr/> City State Zip Code New Bern NC 28562 <hr/> Purpose of Disbursement contribution Candidate Name Sen. Beverly Perdue <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.68499 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 4000.00

SUBTOTAL of Disbursements This Page (optional) ▶

8500.00

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

**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"/> 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 Cross and Blue Shield of North Carolina Employee Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Laura Wiley

Mailing Address

City

State

Zip Code

Purpose of Disbursement
contribution

Candidate Name
Laura Wiley

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.68488

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

12250.00