

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 01 / 01 / 2017 through 06 / 30 / 2017

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

Signature of Treasurer Glidden, Emily, , , [Electronically Filed] Date 07 / 31 / 2017

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		116079.65
(b) Cash on Hand at Beginning of Reporting Period.....	116079.65	
(c) Total Receipts (from Line 19)	86484.38	86484.38
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	202564.03	202564.03
7. Total Disbursements (from Line 31).....	60630.08	60630.08
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	141933.95	141933.95
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 SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 01 / 01 / 2017 To: 06 / 30 / 2017

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	66291.20	66291.20
(ii) Unitemized	13193.18	13193.18
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	79484.38	79484.38
(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)	79484.38	79484.38
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.....	7000.00	7000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	86484.38	86484.38
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	86484.38	86484.38

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	60500.00	60500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	130.08	130.08
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	60630.08	60630.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	60630.08	60630.08

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)	79484.38	79484.38
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	79484.38	79484.38
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
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	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 68
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Acosta, Fernando, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx8148
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19037
 Amount of Each Receipt this Period
 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Aram, Cyrus, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8445
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19041
 Amount of Each Receipt this Period
 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Ayoubpour, Siamak, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx0962
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19043
 Amount of Each Receipt this Period
 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	975.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Baker, Terri, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx1950, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19045
 Amount of Each Receipt this Period 351.00
 Memo Item
 Payroll contribution per cycle \$27.00

B. Balakai, Evgenia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx8318 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19046
 Amount of Each Receipt this Period 300.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Baldi, Phillip, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx6202 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Medical Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19047
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	976.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Balousek, Bret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx527
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19048
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Barnes, Tracy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx2076
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19051
 Amount of Each Receipt this Period 650.00
 Memo Item
 Payroll contribution per cycle \$50.00

C. Barnhard, Christine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx7811
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Sr. Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19052
 Amount of Each Receipt this Period 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	1209.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Bassett, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx2676
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19054
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Bassett, Peter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx1290
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19055
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Battin, David, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx4657
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19056
 Amount of Each Receipt this Period 260.00
 Memo Item
 Payroll contribution per cycle \$20.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Beal, Kenneth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx3608
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19057
 Amount of Each Receipt this Period 260.00
 Memo Item
 Payroll contribution per cycle \$20.00

B. Beller, Kimberly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx5254
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19059
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Bergman, Patrice, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx6395
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19060
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	910.00
TOTAL This Period (last page this line number only).....	

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

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

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

A. Bergstrom, Melinda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx2057
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19061
 Amount of Each Receipt this Period
 260.00
 Memo Item
 Payroll contribution per cycle \$20.00

B. Beuoy, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# 5248
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19062
 Amount of Each Receipt this Period
 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Bhargava, Nitin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx4047
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19063
 Amount of Each Receipt this Period
 910.00
 Memo Item
 Payroll contribution per cycle \$70.00

SUBTOTAL of Receipts This Page (optional).....▶	1495.00
TOTAL This Period (last page this line number only).....▶	

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

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

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

A. Blakeman, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee#xx1919
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19064
 Amount of Each Receipt this Period 390.00
 Memo Item
 Payroll contribution per cycle \$30.00

B. Bleau, Jason, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1927
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19065
 Amount of Each Receipt this Period 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Braza, Carlo, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx1673
 50 Beale street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Senior Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19069
 Amount of Each Receipt this Period 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....▶	858.00
TOTAL This Period (last page this line number only).....▶	

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

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

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

A. Britls, Ruta, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx2060
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19070
 Amount of Each Receipt this Period
 260.00
 Memo Item
 Payroll contribution per cycle \$20.00

B. Brizendine, Laverne A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx6076
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19071
 Amount of Each Receipt this Period
 360.00
 Memo Item
 Payroll contribution per cycle \$30.00

C. Brooks, Nicole, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx7380
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19072
 Amount of Each Receipt this Period
 390.00
 Memo Item
 Payroll contribution per cycle \$30.00

SUBTOTAL of Receipts This Page (optional).....	1010.00
TOTAL This Period (last page this line number only).....	

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

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

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

A. Brown, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp #xx0647
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19073
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Brown, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx9004, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 411.32

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19074
 Amount of Each Receipt this Period 411.32
 Memo Item
 Payroll contribution per cycle \$31.64

C. Campagna, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3045
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19078
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....▶ 1061.32
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 15 OF 68
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Canter, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx3954
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19079
 Amount of Each Receipt this Period
 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Cassell, Sharon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx4114
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19080
 Amount of Each Receipt this Period
 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Casserly, Elena, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx6221
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19081
 Amount of Each Receipt this Period
 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	793.00
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 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Casulo, Adriel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx6492
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 234.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19084
 Amount of Each Receipt this Period
 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Cates, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8886
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19085
 Amount of Each Receipt this Period
 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Cemo, Summer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3503
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 234.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19087
 Amount of Each Receipt this Period
 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 793.00
TOTAL This Period (last page this line number only)..... ▶

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

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

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

A. Cerf, Kristen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx3590
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Assoc General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19088
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Chasin, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx8020
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1625.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19090
 Amount of Each Receipt this Period 1625.00
 Memo Item
 Payroll contribution per cycle \$125.00

C. Chayt, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3401
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Assoc. General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19091
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....▶ 2275.00
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 18 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Chong, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx4168
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19094
 Amount of Each Receipt this Period
 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Cohen, Gary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx4352
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19098
 Amount of Each Receipt this Period
 600.00
 Memo Item
 Payroll contribution per cycle \$60.00

C. Connell, Kristen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx4359
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19100
 Amount of Each Receipt this Period
 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	1159.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 68
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Dahlem, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Emp# xx1109
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1430.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19102

Amount of Each Receipt this Period
 1430.00

Memo Item
 Payroll contribution per cycle \$110.00

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

Mailing Address Emp# xx0442
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19103

Amount of Each Receipt this Period
 325.00

Memo Item
 Payroll contribution per cycle \$25.00

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

Mailing Address Employee #xx7287
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19104

Amount of Each Receipt this Period
 325.00

Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2080.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. DeBerry, Andrea, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx1594
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19108
 Amount of Each Receipt this Period
 300.00
 Memo Item
 Payroll contribution per cycle \$30.00

B. Dehart, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx0621
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Consultant Lead
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19109
 Amount of Each Receipt this Period
 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Devine, Renee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx0495
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19110
 Amount of Each Receipt this Period
 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	768.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Dharmer, Rajkumar, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8261
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19111
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Drahmann, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx7100
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19114
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Dutra, Cynthia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3097
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19115
 Amount of Each Receipt this Period 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	884.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Edwards, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3066
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19116
 Amount of Each Receipt this Period
 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Ejuwa, Jacqueline, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx3113
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 481.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19118
 Amount of Each Receipt this Period
 481.00
 Memo Item
 Payroll contribution per cycle \$37.00

C. Elliott, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx5549
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19119
 Amount of Each Receipt this Period
 585.00
 Memo Item
 Payroll contribution per cycle \$45.00

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Ellis, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx2404
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19120
 Amount of Each Receipt this Period
 260.00
 Memo Item
 Payroll contribution per cycle \$20.00

B. Engelbert, Dale, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx2109
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19121
 Amount of Each Receipt this Period
 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Ferguson, Kathryn, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx2319
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19122
 Amount of Each Receipt this Period
 260.00
 Memo Item
 Payroll contribution per cycle \$20.00

SUBTOTAL of Receipts This Page (optional).....	754.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Fields, David, , ,

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

Mailing Address Employee # xx3507
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) EVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2496.00

Date of Receipt 06 / 30 / 2017

Transaction ID : SA11AI.19123

Amount of Each Receipt this Period 2496.00

Memo Item
Payroll contribution per cycle \$192.00

B. Fisher, Laura, , ,

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

Mailing Address Employee# xx1784
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2017

Transaction ID : SA11AI.19124

Amount of Each Receipt this Period 234.00

Memo Item
Payroll contribution per cycle \$18.00

C. Flaum, Amanda, , ,

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

Mailing Address Employee # xx1242
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017

Transaction ID : SA11AI.19125

Amount of Each Receipt this Period 325.00

Memo Item
Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional)..... 3055.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 68
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Florez, Hugo, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1071
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19126
 Amount of Each Receipt this Period
 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Fogelman, Carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx2239
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.81

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19127
 Amount of Each Receipt this Period
 225.81
 Memo Item
 Payroll contribution per cycle \$17.37

C. Fortino, Dawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8687
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19128
 Amount of Each Receipt this Period
 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	784.81
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: (check only one)	PAGE 26 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. Gannon, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx2952
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19132
 Amount of Each Receipt this Period
 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Gebhart, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx7244
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19133
 Amount of Each Receipt this Period
 390.00
 Memo Item
 Payroll contribution per cycle \$30.00

C. Gensch, Devin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx4081
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 364.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19134
 Amount of Each Receipt this Period
 364.00
 Memo Item
 Payroll contribution per cycle \$28.00

SUBTOTAL of Receipts This Page (optional).....	988.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Gibson Pace, Diana, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx0252
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19135
 Amount of Each Receipt this Period
 455.00
 Memo Item
 Payroll contribution per cycle \$35.00

B. Gonzales, Celia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx5859
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19138
 Amount of Each Receipt this Period
 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Gregg, Christy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx2233
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19144
 Amount of Each Receipt this Period
 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	1014.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Guerridos, Raul E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx2698
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19148
 Amount of Each Receipt this Period
 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Harris, Myrta, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx3364
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19156
 Amount of Each Receipt this Period
 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Herrera, Ergueen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx2968
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19159
 Amount of Each Receipt this Period
 216.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 775.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Hilty, Larry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx9314
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19161
 Amount of Each Receipt this Period 455.00
 Memo Item
 Payroll contribution per cycle \$35.00

B. Ho, Judith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx9612
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19162
 Amount of Each Receipt this Period 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Ho, Mailin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx3424
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19163
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....▶ 1014.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 68
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Hornbacher, Stanford, , ,		Date of Receipt MM / DD / YYYY 06 / 30 / 2017 Transaction ID : SA11AI.19168
Mailing Address emp xx6615 50 Beale Street		Amount of Each Receipt this Period 292.50
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$22.50
Name of Employer (for Individual) Blue Shield of California	Occupation (for Individual) Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 292.50	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Huber, Christopher, , ,		Date of Receipt MM / DD / YYYY 06 / 30 / 2017 Transaction ID : SA11AI.19169
Mailing Address Employee# xx7445 50 Beale Street		Amount of Each Receipt this Period 234.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$18.00
Name of Employer (for Individual) Blue Shield of California	Occupation (for Individual) Sr. Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Hurd, Thomas, , ,		Date of Receipt MM / DD / YYYY 06 / 30 / 2017 Transaction ID : SA11AI.19170
Mailing Address Employee #xx6366 50 Beale Street		Amount of Each Receipt this Period 390.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$30.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional).....▶	916.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Iwasaki, Jeff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3419
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19173
 Amount of Each Receipt this Period
 585.00
 Memo Item
 Payroll contribution per cycle \$45.00

B. Jacobs, Seth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx6574
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Sr. VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19174
 Amount of Each Receipt this Period
 975.00
 Memo Item
 Payroll contribution per cycle \$75.00

C. Jensen-Badaa, Carrie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1601
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19175
 Amount of Each Receipt this Period
 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	1885.00
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 32 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Jmath, Pooja, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19176
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Johns, Lorie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx5447 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 292.50

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19177
 Amount of Each Receipt this Period 292.50
 Memo Item
 Payroll contribution per cycle \$22.50

C. Kalyan, Krishna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3135 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19181
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	942.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Kano, Wendy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee #xx3063
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19182

Amount of Each Receipt this Period
 325.00

Memo Item
 Payroll contribution per cycle \$25.00

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

Mailing Address Employee# xx4555
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19183

Amount of Each Receipt this Period
 325.00

Memo Item
 Payroll contribution per cycle \$25.00

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

Mailing Address Employee #xx3149
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19187

Amount of Each Receipt this Period
 325.00

Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 975.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Khemani, Pradip, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx7222
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19188
 Amount of Each Receipt this Period
 455.00
 Memo Item
 Payroll contribution per cycle \$35.00

B. Kibler, Tina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx5267
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 871.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19189
 Amount of Each Receipt this Period
 871.00
 Memo Item
 Payroll contribution per cycle \$67.00

C. Kiefer, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx8277
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19190
 Amount of Each Receipt this Period
 780.00
 Memo Item
 Payroll contribution per cycle \$60.00

SUBTOTAL of Receipts This Page (optional).....	2106.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Kim, Keith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Employee #xx5487
 50 Beale St.,

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 455.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19193

Amount of Each Receipt this Period
 455.00

Memo Item
 Payroll contribution per cycle \$35.00

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

Mailing Address Employee # xx3382
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Assoc. General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 234.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19196

Amount of Each Receipt this Period
 234.00

Memo Item
 Payroll contribution per cycle \$18.00

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

Mailing Address Employee# xx2976
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 234.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19198

Amount of Each Receipt this Period
 234.00

Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 923.00

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 36 OF 68
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Lewis, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 Beale Street
 employee #xx2384
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 292.50

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19201
 Amount of Each Receipt this Period 292.50
 Memo Item
 Payroll contribution per cycle \$22.50

B. Liu, Ruth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8903
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19203
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Loving III, Alvin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx7643
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19204
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	942.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Luippold, Analisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx6832
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19208
 Amount of Each Receipt this Period
 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Lum, Alison, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8386
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19209
 Amount of Each Receipt this Period
 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Lynaugh, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx9411
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 520.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19210
 Amount of Each Receipt this Period
 520.00
 Memo Item
 Payroll contribution per cycle \$40.00

SUBTOTAL of Receipts This Page (optional).....	1170.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Lyster, Deborah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx0804
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19211
 Amount of Each Receipt this Period
 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Manning, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3338
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19215
 Amount of Each Receipt this Period
 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Marcoccia, Sibylle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx5264
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Analyst
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19216
 Amount of Each Receipt this Period
 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....	702.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 39 OF 68
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Markovich, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx6510
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19217
 Amount of Each Receipt this Period
 1300.00
 Memo Item
 Payroll contribution per cycle \$100.00

B. Marshall, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8149
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19218
 Amount of Each Receipt this Period
 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Minarcin, Andrea, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 Beale Street
 employee #xx4753
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19223
 Amount of Each Receipt this Period
 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....▶	1859.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Mixon, Haley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx3986
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19224
 Amount of Each Receipt this Period
 585.00
 Memo Item
 Payroll contribution per cycle \$45.00

B. Morimoto, Stephanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx0769
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Assoc. General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19228
 Amount of Each Receipt this Period
 405.00
 Memo Item
 Payroll contribution per cycle \$45.00

C. Moynihan, Desmond, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx1804
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19229
 Amount of Each Receipt this Period
 260.00
 Memo Item
 Payroll contribution per cycle \$20.00

SUBTOTAL of Receipts This Page (optional).....	1250.00
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 41 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Mullany, Kristin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx8111
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Chief of Staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19230
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Murphy, Jon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx2151
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.06

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19231
 Amount of Each Receipt this Period 320.06
 Memo Item
 Payroll contribution per cycle \$24.62

C. Murray, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1032
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19232
 Amount of Each Receipt this Period 780.00
 Memo Item
 Payroll contribution per cycle \$60.00

SUBTOTAL of Receipts This Page (optional).....▶ 1425.06
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 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Nye, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3144
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 715.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19234
 Amount of Each Receipt this Period
 715.00
 Memo Item
 Payroll contribution per cycle \$55.00

B. O'Hara, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx0977
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19237
 Amount of Each Receipt this Period
 910.00
 Memo Item
 Payroll contribution per cycle \$70.00

C. O'Neill, Timothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8459
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19238
 Amount of Each Receipt this Period
 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	1950.00
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 43 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Ocepek, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1761
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19235
 Amount of Each Receipt this Period
 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Odette, Terese, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx7096
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19236
 Amount of Each Receipt this Period
 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Palko, Peter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx0467
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19241
 Amount of Each Receipt this Period
 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	975.00
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 44 OF 68
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Panek, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx8535
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19242
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Papouchian-Kulinski, Armine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx5680
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19243
 Amount of Each Receipt this Period 520.00
 Memo Item
 Payroll contribution per cycle \$40.00

C. Patel, Amul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx5255
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19247
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	1170.00
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 45 OF 68
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Ramey, Alison, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx2396
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19253
 Amount of Each Receipt this Period 260.00
 Memo Item
 Payroll contribution per cycle \$20.00

B. Raongthum, Anchulee J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx6257
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19254
 Amount of Each Receipt this Period 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Rau, Carsten, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3095
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19256
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	819.00
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 46 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Robertson, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx3759
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19260
 Amount of Each Receipt this Period
 650.00
 Memo Item
 Payroll contribution per cycle \$50.00

B. Robinson, Brett, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx7680
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19261
 Amount of Each Receipt this Period
 260.00
 Memo Item
 Payroll contribution per cycle \$20.00

C. Rumsey, Suzanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1333
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19263
 Amount of Each Receipt this Period
 225.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	1135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Russell, Cynthia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx0497
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19264
 Amount of Each Receipt this Period
 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Saadzo, Lina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx5649
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19265
 Amount of Each Receipt this Period
 455.00
 Memo Item
 Payroll contribution per cycle \$35.00

C. Safran, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx9164, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) Manager
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19266
 Amount of Each Receipt this Period
 260.00
 Memo Item
 Payroll contribution per cycle \$20.00

SUBTOTAL of Receipts This Page (optional).....▶	1040.00
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 48 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Salow, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 Beale Street
 employee # xx5516
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19268
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Satterwhaite, Lauri, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx9223
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19270
 Amount of Each Receipt this Period 260.00
 Memo Item
 Payroll contribution per cycle \$20.00

C. Schulz, Shayna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3526
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19272
 Amount of Each Receipt this Period 585.00
 Memo Item
 Payroll contribution per cycle \$45.00

SUBTOTAL of Receipts This Page (optional).....▶ 1170.00
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 49 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Scott, Hope, , ,		Date of Receipt MM / DD / YYYY 06 / 30 / 2017 Transaction ID : SA11AI.19273
Mailing Address Employee # xx0637 50 Beale Street		Amount of Each Receipt this Period 234.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$18.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Sharpsteen, Trudi, , ,		Date of Receipt MM / DD / YYYY 06 / 30 / 2017 Transaction ID : SA11AI.19277
Mailing Address Employee #xx4271 50 Beale Street		Amount of Each Receipt this Period 325.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$25.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) Sr. Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Sheils, Michael, , ,		Date of Receipt MM / DD / YYYY 06 / 30 / 2017 Transaction ID : SA11AI.19279
Mailing Address Employee# xx5617 50 Beale Street		Amount of Each Receipt this Period 585.00
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Payroll contribution per cycle \$45.00
Name of Employer (for Individual) Blue Shield of CA	Occupation (for Individual) VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 585.00	

SUBTOTAL of Receipts This Page (optional).....▶	1144.00
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 50 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Shen, Danny, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx2954
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19281
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Shih, Michelle, Y, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx6919
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19283
 Amount of Each Receipt this Period 275.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Shivinsky, Stephen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8369
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19284
 Amount of Each Receipt this Period 585.00
 Memo Item
 Payroll contribution per cycle \$45.00

SUBTOTAL of Receipts This Page (optional).....	1185.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 51 OF 68
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Smith, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx7922
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19286
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Solomon, Gilbert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx1700
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 599.95

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19287
 Amount of Each Receipt this Period 599.95
 Memo Item
 Payroll contribution per cycle \$46.15

C. Sommercamp, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3636
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19288
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	1249.95
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 52 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Spector, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address emp xx4420, 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 898.56

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19289
 Amount of Each Receipt this Period
 898.56
 Memo Item
 Payroll contribution per cycle \$69.12

B. Stuart, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx2061 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19292
 Amount of Each Receipt this Period
 585.00
 Memo Item
 Payroll contribution per cycle \$45.00

C. Su, Felix, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx3601 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19293
 Amount of Each Receipt this Period
 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....▶	1717.56
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 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Summer, Sarah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address emp xx1535
50 Beale street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Sr. Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017

Transaction ID : SA11AI.19295

Amount of Each Receipt this Period
494.00

Memo Item
Payroll contribution per cycle \$38.00

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

Mailing Address Employee # xx3131
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
585.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017

Transaction ID : SA11AI.19296

Amount of Each Receipt this Period
585.00

Memo Item
Payroll contribution per cycle \$45.00

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

Mailing Address Emp# xx5713
50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017

Transaction ID : SA11AI.19300

Amount of Each Receipt this Period
325.00

Memo Item
Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	1404.00
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 54 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Terrana, Antoinette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1496
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19302
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Thygeson, Nels M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8616
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 715.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19303
 Amount of Each Receipt this Period 715.00
 Memo Item
 Payroll contribution per cycle \$55.00

C. Tolentino Lorenzo, Janice, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx4413
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19304
 Amount of Each Receipt this Period 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....▶ 1274.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Ullom, Regina A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Emp# xx5624
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 234.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19307

Amount of Each Receipt this Period
 234.00

Memo Item
 Payroll contribution per cycle \$18.00

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

Mailing Address Emp# xx2459
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 585.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19309

Amount of Each Receipt this Period
 585.00

Memo Item
 Payroll contribution per cycle \$45.00

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

Mailing Address Emp# xx6393
 50 Beale Street

City San Francisco State CA Zip Code 94105

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

Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 234.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19310

Amount of Each Receipt this Period
 234.00

Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1053.00

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 56 OF 68
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Van Goor, Anthony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx3046
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19311
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Villafuerte, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx5007
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19312
 Amount of Each Receipt this Period 216.00
 Memo Item
 Payroll contribution per cycle \$18.00

C. Walthall, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx2537
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19317
 Amount of Each Receipt this Period 910.00
 Memo Item
 Payroll contribution per cycle \$70.00

SUBTOTAL of Receipts This Page (optional).....▶ 1451.00
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 57 OF 68
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Weedn, Molly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx3790
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Sr. Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19319
 Amount of Each Receipt this Period 260.00
 Memo Item
 Payroll contribution per cycle \$20.00

B. Welch Barker, Melissa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx1512
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19320
 Amount of Each Receipt this Period 270.00
 Memo Item
 Payroll contribution per cycle \$45.00

C. Wells, Darrin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8661
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19321
 Amount of Each Receipt this Period 585.00
 Memo Item
 Payroll contribution per cycle \$45.00

SUBTOTAL of Receipts This Page (optional).....	1115.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Whitelaw, Jayne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee #xx5978
 50 Beale St.,
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19324
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Williams, Bryce, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8031
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19326
 Amount of Each Receipt this Period 585.00
 Memo Item
 Payroll contribution per cycle \$45.00

C. Winter, Wendy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx2464
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 06 / 30 / 2017
Transaction ID : SA11AI.19327
 Amount of Each Receipt this Period 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

SUBTOTAL of Receipts This Page (optional).....▶ 1144.00
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 59 OF 68
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Wong, Salina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Emp# xx3056
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19330
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

B. Woodside, Christine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx5513
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19331
 Amount of Each Receipt this Period 225.00
 Memo Item
 Payroll contribution per cycle \$25.00

C. Worbets, Jason, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx1921
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19332
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....	875.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 60 OF 68
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Yang, Winnie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx7578
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19334
 Amount of Each Receipt this Period 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Yao, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 Beale Street employee# xx5363
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19335
 Amount of Each Receipt this Period 455.00
 Memo Item
 Payroll contribution per cycle \$35.00

C. Yi, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee # xx2915
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.19336
 Amount of Each Receipt this Period 325.00
 Memo Item
 Payroll contribution per cycle \$25.00

SUBTOTAL of Receipts This Page (optional).....▶ 1014.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Yokoyama, Krista, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx8246
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of California Occupation (for Individual) Sr. Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19337
 Amount of Each Receipt this Period
 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

B. Zimmerling, Marcus, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Employee# xx5374
 50 Beale Street
 City San Francisco State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Shield of CA Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.19339
 Amount of Each Receipt this Period
 234.00
 Memo Item
 Payroll contribution per cycle \$18.00

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	468.00
TOTAL This Period (last page this line number only).....	66291.20

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 62 OF 68
<input 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 checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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

A. KEVIN MCCARTHY FOR CONGRESS
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 12667
 City BAKERSFIELD State CA Zip Code 93389
 FEC ID number of contributing federal political committee. **C** C00420935
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2017
Transaction ID : SA16.19347
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 Refund of 2016 General contribution

B. WHITEHOUSE FOR SENATE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 40280
 City PROVIDENCE State RI Zip Code 02940
 FEC ID number of contributing federal political committee. **C** C00410803
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2017
Transaction ID : SA16.19350
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 Refund of 2016 Primary contribution

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	7000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. BERA FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 17 / 2017
Mailing Address PO BOX 582496		FEC Identification Number C00461061 Transaction ID : SB23.19024
City ELK GROVE	State CA	Zip Code 95758
Purpose of Disbursement 2017 Primary		Amount of Each Disbursement this Period 1500.00
Candidate Name BERA FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA	District: 07	

Full Name (Last, First, Middle Initial) B. BLUEPAC - BCBSA PAC		Date of Disbursement MM / DD / YYYY 03 / 17 / 2017
Mailing Address 1310 G STREET NW		FEC Identification Number C00194746 Transaction ID : SB23.19026
City WASHINGTON	State DC	Zip Code 20005
Purpose of Disbursement 2017 Contribution		Amount of Each Disbursement this Period 14500.00
Candidate Name BLUEPAC - BCBSA PAC		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) C. DEMOCRATIC SEN. CAMPAIGN COMMITTEE		Date of Disbursement MM / DD / YYYY 06 / 27 / 2017
Mailing Address 120 MARYLAND AVENUE NE		FEC Identification Number C00042366 Transaction ID : SB23.19036
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement 2017 Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name DEMOCRATIC SEN. CAMPAIGN COMMITTEE		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: DC	District:	

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

18500.00

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)

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

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

A. HEARTLAND VALUES PAC

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 505

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement 2017 Contribution

Candidate Name HEARTLAND VALUES PAC

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY 06 / 12 / 2017

FEC Identification Number: C0049003

Transaction ID : SB23.19032

Amount of Each Disbursement this Period: 2500.00

Memo Item

B. HEIDI VICTORY FUND

Full Name (Last, First, Middle Initial)

Mailing Address 918 PENNSYLVANIA AVE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement 2017 Contribution

Candidate Name HEIDI VICTORY FUND

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY 02 / 09 / 2017

FEC Identification Number: C00629253

Transaction ID : SB23.19007

Amount of Each Disbursement this Period: 2500.00

Memo Item

C. JEFF PAC

Full Name (Last, First, Middle Initial)

Mailing Address 2150 RIVER PLAZA DR. #150

City SACRAMENTO State CA Zip Code 95833

Purpose of Disbursement 2017 Contribution

Candidate Name JEFF PAC

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY 02 / 09 / 2017

FEC Identification Number: C00489112

Transaction ID : SB23.19017

Amount of Each Disbursement this Period: 5000.00

Memo Item

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

10000.00

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)

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

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

Full Name (Last, First, Middle Initial) A. Jimmy Gomez for Congress		Date of Disbursement MM / DD / YYYY 04 / 27 / 2017
Mailing Address 3756 W. Ave 40 Suite K #117		FEC Identification Number C00629659 Transaction ID : SB23.19031 Amount of Each Disbursement this Period 2500.00
City Los Angeles	State CA	Zip Code 90065
Purpose of Disbursement 2017 General		Category/ Type
Candidate Name Jimmy Gomez for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District:	

Full Name (Last, First, Middle Initial) B. KEYSTONE VICTORY FUND		Date of Disbursement MM / DD / YYYY 06 / 27 / 2017
Mailing Address PO BOX 58746		FEC Identification Number C00545830 Transaction ID : SB23.19033 Amount of Each Disbursement this Period 2000.00
City PHILADELPHIA	State PA	Zip Code 19102
Purpose of Disbursement 2017 Contribution		Category/ Type
Candidate Name KEYSTONE VICTORY FUND		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: PA	District: 00	

Full Name (Last, First, Middle Initial) C. MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE		Date of Disbursement MM / DD / YYYY 02 / 09 / 2017
Mailing Address PO Box 3241		FEC Identification Number C00392134 Transaction ID : SB23.19013 Amount of Each Disbursement this Period 2500.00
City Cheyenne	State WY	Zip Code 82003
Purpose of Disbursement 2017 Contribution		Category/ Type
Candidate Name MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State:	District:	

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

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

7000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. MATSUI FOR CONGRESS		Date of Disbursement MM / DD / YYYY 04 / 05 / 2017
Mailing Address PO BOX 1738		FEC Identification Number C00409219 Transaction ID : SB23.19028
City SACRAMENTO	State CA	Zip Code 95812
Purpose of Disbursement 2017 Primary		Amount of Each Disbursement this Period 1500.00
Candidate Name MATSUI FOR CONGRESS		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA	District: 05	

Full Name (Last, First, Middle Initial) B. MIMI WALTERS VICTORY FUND		Date of Disbursement MM / DD / YYYY 04 / 05 / 2017
Mailing Address 9070 IRVINE CENTER DRIVE, #150		FEC Identification Number C00564674 Transaction ID : SB23.19029
City IRVINE	State CA	Zip Code 92618
Purpose of Disbursement 2017 Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name MIMI WALTERS VICTORY FUND		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) C. MOVING AMERICA FORWARD		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017
Mailing Address 972 W. WHITMIRE DRIVE		FEC Identification Number C00375451 Transaction ID : SB23.19021
City MELBOURNE	State FL	Zip Code 32935
Purpose of Disbursement 2017 Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name MOVING AMERICA FORWARD		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	9000.00
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)

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

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

Full Name (Last, First, Middle Initial)

A. NEW PAC

Mailing Address P.O. BOX 7480

City VISALIA State CA Zip Code 93290

Purpose of Disbursement
2017 Contribution

Candidate Name
NEW PAC

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2017

FEC Identification Number

C C00398750

Transaction ID : SB23.19011

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SCOTT PETERS FOR CONGRESS

Mailing Address PO BOX 22074

City SAN DIEGO State CA Zip Code 92192

Purpose of Disbursement
2017 Primary

Candidate Name
SCOTT PETERS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify)

State: CA District: 52

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2017

FEC Identification Number

C C00503110

Transaction ID : SB23.19019

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. VALADAO FOR CONGRESS

Mailing Address 504 VAN NESS

City FRESNO State CA Zip Code 93721

Purpose of Disbursement
2017 Primary

Candidate Name
VALADAO FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: CA District: 21

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2017

FEC Identification Number

C C00499392

Transaction ID : SB23.19010

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

11500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. WALDEN VICTORY FUND

Full Name (Last, First, Middle Initial)

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement 2017 Contribution

Candidate Name WALDEN VICTORY FUND

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 09 / 2017

FEC Identification Number: C00542787

Transaction ID : SB23.19022

Amount of Each Disbursement this Period: 2500.00

Memo Item

B. WHITEHOUSE FOR SENATE

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 40280

City PROVIDENCE State RI Zip Code 02940

Purpose of Disbursement 2017 General

Candidate Name WHITEHOUSE FOR SENATE

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify)

State: RI District: 00

Date of Disbursement: 04 / 04 / 2017

FEC Identification Number: C00410803

Transaction ID : SB23.19027

Amount of Each Disbursement this Period: 2000.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	4500.00
TOTAL This Period (last page this line number only).....▶	60500.00