

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Healthy Government Committee-The Political Action Committee of BCBSAZ

ADDRESS (number and street)

P.O. Box 13466

☐Check if different
than previously
reported. (ACC)

Phoenix

AZ

85002

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00215202

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☒

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

11

02

2010

in the
State of

AZ

(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

☐☐☐in the
State of☐

5. Covering Period

10

01

2010

through

10

13

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Ms Kathryn Baker

Signature of Treasurer

Electronically Filed by Ms Kathryn Baker

Date

11

29

2010

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

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

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 15

Write or Type Committee Name

Healthy Government Committee-The Political Action Committee of BCBSAZ

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	3764.95
(b) Cash on Hand at Beginning of Reporting Period	1990.95	
(c) Total Receipts (from Line 19)	979.00	19665.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	2969.95	23429.95
7. Total Disbursements (from Line 31)	400.00	20860.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2569.95	2569.95
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

FEC Form 3X (Rev. 06/2004)

3 / 15

Write or Type Committee Name

Healthy Government Committee-The Political Action Committee of BCBSAZ

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

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)	500.00	6200.00
(ii) Unitemized	479.00	13021.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	979.00	19221.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	979.00	19221.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	444.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	979.00	19665.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	979.00	19665.00

DETAILED SUMMARY PAGE

of Disbursements

4 / 15

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	0.00	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.....	400.00	20860.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	400.00	20860.00	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	400.00	20860.00	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 15

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)	979.00	19221.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	979.00	19221.00
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: PAGE 6 / 15

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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

NAME OF COMMITTEE (In Full)

Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)

Mrs. Karen Abraham

Mailing Address 2444 W. Las Palmaritas Drive

City	State	Zip Code
Phoenix	AZ	85021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross & Blue Shield
of AZOccupation
Sr. VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	7	/	2	0	1	0

Transaction ID: SA11AI.10484

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)

Teresa Araiza

Mailing Address P.O. Box 13466

City	State	Zip Code
Phoenix	AZ	85002-3466

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
AZOccupation
Manager, Claims Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	7	/	2	0	1	0

Transaction ID: SA11AI.10486

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

Mr. Tony Astorga

Mailing Address P.O. Box 13466

City	State	Zip Code
Phoenix	AZ	85002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross & Blue Shield
of AZOccupation
Sr. V.P.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	7	/	2	0	1	0

Transaction ID: SA11AI.10491

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

55.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 7 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)

Ms Kathryn Baker

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
 Phoenix AZ 85021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross & Blue Shield
of Arizona

Occupation
VP & Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.10493

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Cameron Black

Mailing Address P.O. Box 13466

City State Zip Code
 Phoenix AZ 85002-3466

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
AZ

Occupation
Director, Treasury

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.10499

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

Mr. Richard Boals

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
 Phoenix AZ 85021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross & Blue Shield
of Arizona

Occupation
President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.10501

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

65.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 8 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)

Ms Susan Broadman

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
 Phoenix AZ 85021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross & Blue Shield
of Arizona

Occupation
Staffing Specialist/EEO Coordinator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.10504

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)

Bill Bruno

Mailing Address P.O. Box 13466

City State Zip Code
 Phoenix AZ 85002

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSAZ

Occupation
Small Group Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.10505

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

Mr. James Brutlag

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
 Phoenix AZ 85021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross & Blue Shield
of Arizona

Occupation
V.P.-Underwriting & Actuarial Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.10506

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 15

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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

NAME OF COMMITTEE (In Full)

Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)

Sherri Burruss

Mailing Address P. O. Box 13466

City

Phoenix

State

AZ

Zip Code

85002

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSAZOccupation
Actuarial

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	7	/	2	0	1	0

Transaction ID: SA11AI.10507

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Helen Chandler

Mailing Address 2444 W. Las Palmaritas Drive

City

Phoenix

State

AZ

Zip Code

85021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross & Blue Shield
of ArizonaOccupation
Sr. V.P.-Claims & Federal Programs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	7	/	2	0	1	0

Transaction ID: SA11AI.10509

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Kathy Dierks

Mailing Address P. O. Box 13466

City

Phoenix

State

AZ

Zip Code

85002

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSAZOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	7	/	2	0	1	0

Transaction ID: SA11AI.10514

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

65.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 10 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)

Mr. Richard Hannon

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
 Phoenix AZ 85021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross & Blue Shield
of Arizona

Occupation
Sr. V.P.-External Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.10526

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Bonnie Irwin

Mailing Address 2444 W. Las Palmaritas

City State Zip Code
 Phoenix AZ 85021

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSAZ

Occupation
vice president

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.10532

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

Sheri Jackson

Mailing Address 2444 W Las Palmaritas

City State Zip Code
 Phoenix AZ 85021

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSAZ

Occupation
vice president

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.10534

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

55.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 11 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)

Marty Laurel

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
 Phoenix AZ 85021

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSAZ

Occupation
vice president

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.10539

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)

Vicky McDonald

Mailing Address P. O. Box 13466

City State Zip Code
 Phoenix AZ 85002

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSAZ

Occupation
vice president

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.10544

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

elizabeth messina

Mailing Address P. O. Box 13466

City State Zip Code
 Phoenix AZ 85002

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSAZ

Occupation
SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.10546

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

65.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 12 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)

Mrs. Jody Miller

Mailing Address 2444 W. Las Palmaritas

City

Phoenix

State

AZ

Zip Code

85021

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSAZ

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.10548

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Susan Navran

Mailing Address 2444 W. Las Palmaritas

City

Phoenix

State

AZ

Zip Code

85021

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSAZ

Occupation
Executive V.P.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.10553

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

Adam Rice

Mailing Address P. O. Box 13466

City

Phoenix

State

AZ

Zip Code

85002

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSAZ

Occupation
director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.10566

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 13 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)

Deanna Salazar

Mailing Address P. O. Box 13466

City

Phoenix

State

AZ

Zip Code

85002

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSAZ

Occupation

Sr. Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.10568

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mary Semma

Mailing Address P. O. Box 13466

City

Phoenix

State

AZ

Zip Code

85002

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSAZ

Occupation

VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.10571

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

Su Tucker

Mailing Address P. O. Box 13466

City

Phoenix

State

AZ

Zip Code

85002

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSAZ

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.10581

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

55.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 15

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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

NAME OF COMMITTEE (In Full)

Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)

Neil Eugene Wilson

Mailing Address P.O. Box 13466

City

Phoenix

State

AZ

Zip Code

85002-3466

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
AZ

Occupation

Director, Large Group Sales

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	7		2	0	1	0

Transaction ID: SA11AI.10589

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

25.00

TOTAL This Period (last page this line number only)

500.00

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)

PAGE 15 / 15

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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)

Healthy Government Committee-The Political Action Committee of BCBSAZ

A. Full Name (Last, First, Middle Initial)
Committee to Elect Sylvia T. Allen 2010

Mailing Address P.O. Box 952

City State Zip Code
Snowflake AZ 85937

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼

State: AZ District:

Transaction ID: SB23.10593

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

B. Full Name (Last, First, Middle Initial)
The Committee to Elect Steve Urie

Mailing Address 935 N. Tucana Lane

City State Zip Code
Gilbert AZ 85234

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼

State: AZ District:

Transaction ID: SB23.10592

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

SUBTOTAL of Disbursements This Page (optional)

400.00

TOTAL This Period (last page this line number only)

400.00