

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 602 W. Ionia
 Check if different than previously reported. (ACC)
Lansing MI 48933

2. **FEC IDENTIFICATION NUMBER** C00084061
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 07 01 2009 through 12 31 2009

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 Mr. Mark Cook

Signature of Treasurer Electronically Filed by Mr. Mark Cook Date 04 15 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								
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Blue Cross Blue Shield of Michigan PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		280272.72
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	319909.46									
(c) Total Receipts (from Line 19)	315518.84	609772.68								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	635428.30	890045.40								
7. Total Disbursements (from Line 31)	193819.89	448644.48								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	441608.41	441400.92								
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)

Write or Type Committee Name
Blue Cross Blue Shield of Michigan PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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)	247106.08	399906.92
(ii) Unitemized	66160.39	200936.30
(iii) TOTAL (add Lines 11(a)(i) and (ii)	313266.47	600843.22
(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)	313266.47	600843.22
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	1500.00	6868.00
17. Other Federal Receipts (Dividends, Interest, etc.)	752.37	2061.46
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))	315518.84	609772.68
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	315518.84	609772.68

DETAILED SUMMARY PAGE

of Disbursements

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.....	32500.00	71368.00
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	12.00	120.00
(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))	12.00	120.00
29. Other Disbursements.....	161307.89	377156.48
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))..	193819.89	448644.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	193819.89	448644.48

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	313266.47	600843.22
34. Total Contribution Refunds (from Line 28(d))	12.00	120.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	313254.47	600723.22
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 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Capitol National Bank

Mailing Address 200 Washington Sq.

City State Zip Code
Lansing MI 48933

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1417.09

Date of Receipt
MM / DD / YYYY
07 / 31 / 2009

Transaction ID: 30727411

Amount of Each Receipt this Period
108.00

Bank Interest Received (1-60)

B.

Full Name (Last, First, Middle Initial)
Capitol National Bank

Mailing Address 200 Washington Sq.

City State Zip Code
Lansing MI 48933

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1532.82

Date of Receipt
MM / DD / YYYY
08 / 31 / 2009

Transaction ID: 30727412

Amount of Each Receipt this Period
115.73

Bank Interest Received (1-60)

C.

Full Name (Last, First, Middle Initial)
Capitol National Bank

Mailing Address 200 Washington Sq.

City State Zip Code
Lansing MI 48933

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1656.25

Date of Receipt
MM / DD / YYYY
09 / 30 / 2009

Transaction ID: 30727414

Amount of Each Receipt this Period
123.43

Bank Interest Received (1-60)

SUBTOTAL of Receipts This Page (optional) ► **347.16**

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 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Capitol National Bank
Mailing Address 200 Washington Sq.
City State Zip Code
Lansing MI 48933
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1784.78
Date of Receipt: 10 / 31 / 2009
Transaction ID: 31233289
Amount of Each Receipt this Period: 128.53
Bank Interest Received

B. Full Name (Last, First, Middle Initial)
Capitol National Bank
Mailing Address 200 Washington Sq.
City State Zip Code
Lansing MI 48933
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1912.09
Date of Receipt: 11 / 30 / 2009
Transaction ID: 31233297
Amount of Each Receipt this Period: 127.31
Bank Interest Received

C. Full Name (Last, First, Middle Initial)
Capitol National Bank
Mailing Address 200 Washington Sq.
City State Zip Code
Lansing MI 48933
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2048.74
Date of Receipt: 12 / 31 / 2009
Transaction ID: 31233303
Amount of Each Receipt this Period: 136.65
Bank Interest Received

SUBTOTAL of Receipts This Page (optional) ► 392.49
TOTAL This Period (last page this line number only) ► 739.65

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 386
	(check only one)
<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 Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Dave Camp For Congress		Date of Receipt																				
	Mailing Address 5915 Eastman Ave. Suite 100 5915 Eastman Ave. Suite 100		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y													
	1	0		1	6		2	0	0	9													
	City State Zip Code Midland MI 48640		Transaction ID: 30727536																				
FEC ID number of contributing federal political committee. C C00347476		Amount of Each Receipt this Period 500.00																					
Name of Employer Occupation		Refund of Contribution to Federal Candidates																					
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00																						

B.	Full Name (Last, First, Middle Initial) Rogers For Congress		Date of Receipt																				
	Mailing Address Post Office Box 581 Post Office Box 581		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	6		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y													
	1	2		1	6		2	0	0	9													
	City State Zip Code Brighton MI 48116		Transaction ID: 31233643																				
FEC ID number of contributing federal political committee. C C00343863		Amount of Each Receipt this Period 1000.00																					
Name of Employer Occupation		Contributions to Federal Candidates																					
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00																						

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Kathleen Gardner

Mailing Address 801 Anita

City State Zip Code
Grosse Pointe Wood MI 48236-1414

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

Name of Employer Blue Cross Blue Shield of Michigan
Occupation Specialist-Com Writer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: 31248518

Amount of Each Receipt this Period
9.00

BCBSM 12-31-09

B.

Full Name (Last, First, Middle Initial)
Laurie Ann McIntee

Mailing Address 3356 S. Blvd., E.

City State Zip Code
Blmfld Hls MI 48304-1155

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

Name of Employer Blue Cross Blue Shield of Michigan
Occupation Senior Health Care Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 405.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: 31608420

Amount of Each Receipt this Period
0.00

[MEMO ITEM]
Refund(s) on Schedule B
Totaling \$9.00 This changes the YTD Total to \$405.-00

C.

Full Name (Last, First, Middle Initial)
Catherine R Venet

Mailing Address 21219 Briarcliff St

City State Zip Code
St Clair Shores MI 48082-1224

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

Name of Employer Blue Cross Blue Shield of Michigan
Occupation Secretary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: 31608445

Amount of Each Receipt this Period
0.00

[MEMO ITEM]
Refund(s) on Schedule B
Totaling \$3.00 This changes the YTD Total to \$5.50

SUBTOTAL of Receipts This Page (optional) ► 9.00

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 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Joseph R Niemer		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 2115 W Lincoln St		Transaction ID: PR1001877523244		
	City Birmingham	State MI	Zip Code 48009-1826	Amount of Each Receipt this Period 216.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager	Aggregate Year-to-Date 432.00		

Receipt For:
 Primary General
 Other (specify) ▼

P/R Deduction (\$18.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) John T Murphy		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 3236 Gateway Ledge		Transaction ID: PR1001879823244		
	City Walled Lake	State MI	Zip Code 48390-4303	Amount of Each Receipt this Period 182.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Mgr Provider Affairs	Aggregate Year-to-Date 338.00		

Receipt For:
 Primary General
 Other (specify) ▼

P/R Deduction (\$15.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Nancy J Hammond		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 3506 Linwood Avenue		Transaction ID: PR1012895823244		
	City Royal Oak	State MI	Zip Code 48073-2352	Amount of Each Receipt this Period 126.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager	Aggregate Year-to-Date 234.00		

Receipt For:
 Primary General
 Other (specify) ▼

P/R Deduction (\$6.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	524.00
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 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Rita J Kakish	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 11903 Glenview Dr	Transaction ID: PR1018716423244
	City State Zip Code Plymouth MI 48170-3048	Amount of Each Receipt this Period 182.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00	P/R Deduction (\$13.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Kenneth R Dallafor	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 4556 Golf View Dr	Transaction ID: PR1023392323244
	City State Zip Code Brighton MI 48116-9750	Amount of Each Receipt this Period 840.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Blue Cross Blue Shield of Michigan Occupation SVP Grp Sls & Corp Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1560.00	P/R Deduction (\$60.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Tamre M Davis	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 19975 Warrington Dr	Transaction ID: PR1025166623244
	City State Zip Code Detroit MI 48221-1825	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Blue Cross Blue Shield of Michigan Occupation Ex Assistant To VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00	P/R Deduction (\$6.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	▶	1148.00
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 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Cindy S Monroe

Mailing Address 320 Hamilton Rd

City State Zip Code
Bloomfield Hills MI 48301-2544

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: VP Strategy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1025169223244
Amount of Each Receipt this Period: 406.00
P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Diane A Stout

Mailing Address 5481 Fieldstone Drive SW

City State Zip Code
Wyoming MI 49418-9306

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager-Account

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1025170523244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W-ekly)

C.

Full Name (Last, First, Middle Initial)
Francis Goode

Mailing Address PO Box 241583

City State Zip Code
Detroit MI 48224-5583

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Grievance & App Team Lead

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1034238423244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W-ekly)

SUBTOTAL of Receipts This Page (optional) ▶ **658.00**

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 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Alfrieda M Vanderburg

Mailing Address 1460 Wellesley Drive

City State Zip Code
Detroit MI 48203-1476

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Systems Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1283158023244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W-weekly)

B.

Full Name (Last, First, Middle Initial)
Kim E Beattie

Mailing Address 16961 Nichols Road

City State Zip Code
East Lansing MI 48823-9612

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Analyst - Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1550950023244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W-weekly)

C.

Full Name (Last, First, Middle Initial)
John R Southworth

Mailing Address 5477 Sand Beach Rd

City State Zip Code
Grass Lk MI 49240-9344

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager Fraud Investigation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1550956823244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W-weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **378.00**

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 / 386
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) James D Line		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 9
	Mailing Address 117 Wenonah Drive		Transaction ID: PR1579218423244
	City Pontiac	State MI	Zip Code 48341-1957
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 252.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Director	P/R Deduction (\$29.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 463.00		

B.	Full Name (Last, First, Middle Initial) Tracy M Mance		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 9
	Mailing Address 1834 Wickham St		Transaction ID: PR1593162423244
	City Royal Oak	State MI	Zip Code 48073-1162
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Strategy Perf Analyst	P/R Deduction (\$9.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00		

C.	Full Name (Last, First, Middle Initial) Deidra A Wilson		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 9
	Mailing Address 3031 Crofton Dr		Transaction ID: PR1593164923244
	City Dewitt	State MI	Zip Code 48820-7770
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 252.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager	P/R Deduction (\$18.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00		

SUBTOTAL of Receipts This Page (optional)	▶	630.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 15 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Benjamin N Grier

Mailing Address 19841 Northbrook Dr

City State Zip Code
Southfield MI 48076-5053

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director Treasury Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1593165123244
 Amount of Each Receipt this Period: 630.00
 P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Monica L Mckinney

Mailing Address 17596 Roxbury Ave

City State Zip Code
Southfield MI 48075-4235

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1593166523244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Erik T Poppe

Mailing Address 1002 Whitegate Dr

City State Zip Code
Northville MI 48167-1078

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

Name of Employer: LifeSecure
Occupation: TBD-Manager & Above

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1604519123244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **1134.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Christopher M Bouschet

Mailing Address 532 Graten St

City Birmingham State MI Zip Code 48009-6516

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Consultant-Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR1604519323244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$9.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Harvie Jarriell

Mailing Address 1219 Berkshire Dr

City Williamston State MI Zip Code 48895-9211

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR1604520123244

Amount of Each Receipt this Period 406.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Michael B Zell

Mailing Address 5411 Bright Creek Court

City Flint State MI Zip Code 48532-2254

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager-Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR1604520323244

Amount of Each Receipt this Period 252.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **784.00**

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

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

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

FOR LINE NUMBER: PAGE 17 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Tina M Federighe

Mailing Address 2990 House St NE

City Belmont State MI Zip Code 49306-9715

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager-Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR1604520723244
 Amount of Each Receipt this Period 140.00
 P/R Deduction (\$13.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Tiffany N Person

Mailing Address 6786 Lakeview Blvd Apt 18103

City Westland State MI Zip Code 48185-6611

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR1632423623244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Michael J Arvin

Mailing Address 28751 Hearthstone Dr

City Novi State MI Zip Code 48377-2722

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Team Lead Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR1632430623244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 392.00

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 18 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Stephen H Kellar

Mailing Address 23268 Mystic Frst

City State Zip Code
Novi MI 48375-4013

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

Name of Employer LifeSecure Occupation VP & CFO LifeSecure

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	9

Transaction ID: PR1632431223244

Amount of Each Receipt this Period 210.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Horst G Cawi

Mailing Address 52283 Staffordshire

City State Zip Code
Shelby Township MI 48316-3468

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Procurement Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	9

Transaction ID: PR1632432723244

Amount of Each Receipt this Period 182.00

P/R Deduction (\$13.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
John T Jakcsy

Mailing Address 810 Highview

City State Zip Code
Dearborn MI 48128-1548

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Specialist-Com Writer Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	9

Transaction ID: PR1632433123244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **518.00**

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 19 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Shibu T Samuel

Mailing Address 4038 Mayfair St

City Dearborn Heights State MI Zip Code 48125-3063

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Consultant Product Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR1691474423244

Amount of Each Receipt this Period 252.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Maureen E Beauregard

Mailing Address 115 E Seventh St

City Monroe State MI Zip Code 48161-1307

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Technology Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR1691478123244

Amount of Each Receipt this Period 182.00

P/R Deduction (\$13.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Robert J Wilson

Mailing Address 38250 Shana Dr

City Clinton Township State MI Zip Code 48036-1878

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Systems Analyst Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR1691478223244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 560.00

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

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

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

FOR LINE NUMBER: PAGE 20 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Kathryn G Levine
Mailing Address 1788 Pierce
City Birmingham State MI Zip Code 48009-2056
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation VP Corp Marktng & Product
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1560.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR1691486023244
Amount of Each Receipt this Period 840.00
P/R Deduction (\$60.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Joseph H Hohner
Mailing Address 2106 Stonebridge Way
City Canton State MI Zip Code 48188-6227
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation SVP Chief of Staff & CIO
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1560.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR1723467723244
Amount of Each Receipt this Period 840.00
P/R Deduction (\$75.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mary C Graham
Mailing Address 619 Fernwood Rd
City Royal Oak State MI Zip Code 48067-1636
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Analyst-Sales
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR1750084823244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$9.00 Bi-W-ekly)

SUBTOTAL of Receipts This Page (optional) ► 1806.00
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 21 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Rebecca S Spencer

Mailing Address 13813 Mead Creek

City Bath State MI Zip Code 48808-8705

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Analyst - Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1750094923244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-W- weekly)

B. Full Name (Last, First, Middle Initial)
Ann M Baker

Mailing Address 1153 Nottingham

City Grosse Pointe Park State MI Zip Code 48230-1339

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1750096523244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi- Weekly)

C. Full Name (Last, First, Middle Initial)
George B Eichorn

Mailing Address 28822 Los Olas Drive

City Warren State MI Zip Code 48093-7113

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Sales Force Inst Designer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1750114523244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-W- weekly)

SUBTOTAL of Receipts This Page (optional) ► **658.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Ali K Gunal

Mailing Address 3560 Strubridge Ct

City State Zip Code
Ann Arbor MI 48105-2839

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1750122923244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$13.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mohammad S Zafar

Mailing Address 4017 Normanwood Dr

City State Zip Code
West Bloomfield MI 48323-1748

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Physician Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1750123723244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Richard A Hetzel

Mailing Address 635 McKinley St

City State Zip Code
Plymouth MI 48170-1521

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: VP Corporate Communications

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1793762923244
 Amount of Each Receipt this Period: 630.00
 P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **938.00**

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 23 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Phillip D Churchill Jr

Mailing Address 3026 Westchester Rd

City State Zip Code
Lansing MI 48911-1044

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Attorney Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1794222923244
Amount of Each Receipt this Period: 406.00
P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Gary M Harvey

Mailing Address 1835 Robindale

City State Zip Code
Dearborn MI 48128-1047

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: VP Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1794229923244
Amount of Each Receipt this Period: 630.00
P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Elizabeth R Haar

Mailing Address 3607 Kipling Cir

City State Zip Code
Howell MI 48843-7444

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: SVP Subsidiary Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1950.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1794230023244
Amount of Each Receipt this Period: 1050.00
P/R Deduction (\$75.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **2086.00**

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 24 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
James M Huetteman

Mailing Address 22901 Wilson

City Dearborn State MI Zip Code 48128-2808

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Technology Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR1805289323244

Amount of Each Receipt this Period 182.00

P/R Deduction (\$13.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Erik B Sanderson

Mailing Address 5908 Anglers Dr

City Ortonville State MI Zip Code 48462-9507

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Application Developer Adv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR1805290123244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$6.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Kevin P Monaghan

Mailing Address 1719 Hillcrest Drive

City Rochester Hills State MI Zip Code 48306-3141

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Tech Solutions Architect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR1805290423244

Amount of Each Receipt this Period 252.00

P/R Deduction (\$18.00 Bi-Weekly)

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

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

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

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

FOR LINE NUMBER: PAGE 25 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Laurens J De Jong

Mailing Address 7990 Lake Crest Dr

City Ypsilanti State MI Zip Code 48197-6751

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Team Lead Adv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR1805290623244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$9.00 Bi-W- weekly)

B. Full Name (Last, First, Middle Initial)
Richard R Baharozian

Mailing Address 2525 Farm Brook Trail

City Oxford State MI Zip Code 48370-2305

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR1805291023244
 Amount of Each Receipt this Period 252.00
 P/R Deduction (\$18.00 Bi- Weekly)

C. Full Name (Last, First, Middle Initial)
Joseph O David

Mailing Address 345 Troon Lane

City Canton State MI Zip Code 48188-3098

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR1805292223244
 Amount of Each Receipt this Period 252.00
 P/R Deduction (\$29.00 Bi- Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **630.00**

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 26 / 386

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Kevin J Sobas

Mailing Address 42544 Ravina Ct

City State Zip Code
Northville MI 48168-2081

FEC ID number of contributing federal political committee. C

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Application Developer Adv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR1805292323244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
Joseph M Chahine

Mailing Address 6401 Barrie

City State Zip Code
Dearborn MI 48126-2017

FEC ID number of contributing federal political committee. C

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Operations Developer Adv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR1805292423244

Amount of Each Receipt this Period 140.00

P/R Deduction (\$10.00 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)
Constance M Samuel

Mailing Address 10173 W Outer Drive

City State Zip Code
Detroit MI 48223-2277

FEC ID number of contributing federal political committee. C

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR1805293423244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$18.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional) 392.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 27 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Shelley L Van Riper

Mailing Address 353 Starkweather St

City Plymouth State MI Zip Code 48170-1329

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Health Care Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR1805296923244
 Amount of Each Receipt this Period 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Steven B Watkeys

Mailing Address 31967 Lamar

City Farmington State MI Zip Code 48336-2425

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR1805297123244
 Amount of Each Receipt this Period 182.00
 P/R Deduction (\$13.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Deirdre L Hope

Mailing Address 44170 Westminister Way

City Canton State MI Zip Code 48187-3165

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Analyst - Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR1805304323244
 Amount of Each Receipt this Period 252.00
 P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 686.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Donna J Lomas-Juarez

Mailing Address 16266 Southampton Court

City Livonia State MI Zip Code 48154-2518

FEC ID number of contributing federal political committee. C

Name of Employer Blue Cross Blue Shield of Michigan Occupation Mgr Prod Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt M M / D D / Y Y Y Y
12 / 31 / 2009

Transaction ID: PR1805304523244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$6.00 Bi-W-
eekly)

B. Full Name (Last, First, Middle Initial)
Dan A Mekled

Mailing Address 1750 N Rosevere

City Dearborn State MI Zip Code 48128-1243

FEC ID number of contributing federal political committee. C

Name of Employer Blue Cross Blue Shield of Michigan Occupation Consultant - Business

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt M M / D D / Y Y Y Y
12 / 31 / 2009

Transaction ID: PR1812696723244

Amount of Each Receipt this Period 252.00

P/R Deduction (\$18.00 Bi-
Weekly)

C. Full Name (Last, First, Middle Initial)
Michael R Larkins

Mailing Address 4836 Shelbyshire Drive

City Shelby Township State MI Zip Code 48316-4158

FEC ID number of contributing federal political committee. C

Name of Employer Blue Cross Blue Shield of Michigan Occupation IT Auditor Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt M M / D D / Y Y Y Y
12 / 31 / 2009

Transaction ID: PR1812698023244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

SUBTOTAL of Receipts This Page (optional) 504.00

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 29 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Jeffrey M Tenerowicz

Mailing Address 19733 Cardene Way

City Northville State MI Zip Code 48167-2927

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Consultant Product Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR1812702423244
 Amount of Each Receipt this Period 252.00
 P/R Deduction (\$13.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Elisa Hernandez

Mailing Address 234 Wordsworth

City Ferndale State MI Zip Code 48220-2529

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Strategy Perf Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR1812708823244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$9.00 Bi-W-ekly)

C. Full Name (Last, First, Middle Initial)
Paul H Manoian

Mailing Address 37580 Mallory

City Livonia State MI Zip Code 48154-1119

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Technology Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR1812708923244
 Amount of Each Receipt this Period 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 630.00

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 / 386
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Bradley A Anderson		Date of Receipt
	Mailing Address 67900 S Forest		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 9
	City	State	Zip Code
	Richmond	MI	48062-1627
	FEC ID number of contributing federal political committee. C		Transaction ID: PR1812709723244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Application Developer Sr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 468.00	<input type="text"/> 252.00
			P/R Deduction (\$18.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) George B Claiborne		Date of Receipt
	Mailing Address 36089 Parkhurst		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 9
	City	State	Zip Code
	Livonia	MI	48154-5118
	FEC ID number of contributing federal political committee. C		Transaction ID: PR1812711823244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Team Lead Sr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 234.00	<input type="text"/> 126.00
			P/R Deduction (\$9.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Larry R Watson		Date of Receipt
	Mailing Address 2462 Coe Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 9
	City	State	Zip Code
	Perrysburg	OH	43551-5623
	FEC ID number of contributing federal political committee. C		Transaction ID: PR1839243723244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 468.00	<input type="text"/> 252.00
			P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 630.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Barbara A Sykes	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 8822 Arnold	Transaction ID: PR1839246523244
	City State Zip Code Redford MI 48239-0000	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Team Leader II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

B.	Full Name (Last, First, Middle Initial) Eva L Wendt	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 3692 Watuga St	Transaction ID: PR1839247523244
	City State Zip Code Commerce Twp MI 48390-1058	Amount of Each Receipt this Period 630.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$45.00 Bi-Weekly)
Name of Employer Blue Cross Blue Shield of Michigan	Occupation VP Subsidiary Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1170.00	

C.	Full Name (Last, First, Middle Initial) Michelle S Pace	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 9608 Hubert	Transaction ID: PR1839248623244
	City State Zip Code Allen Pk MI 48101-1302	Amount of Each Receipt this Period 140.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$13.00 Bi-Weekly)
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Dir Rating/Underwriting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	815.00
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 32 / 386

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Edwin E Doerr

Mailing Address 9081 Rattalee Lake Road

City State Zip Code
Clarkston MI 48348-1635

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 338.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR1848033223244

Amount of Each Receipt this Period

182.00

P/R Deduction (\$13.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Kathleen Gardner

Mailing Address 801 Anita

City State Zip Code
Grosse Pointe Wood MI 48236-1414

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Specialist-Com Writer

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR1848033923244

Amount of Each Receipt this Period

117.00

P/R Deduction (\$9.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Christy Johnson

Mailing Address 16541 Sussex

City State Zip Code
Detroit MI 48235-3855

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Analyst-Sales

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR1848034123244

Amount of Each Receipt this Period

126.00

P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

425.00

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 33 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Michelle Oginsky

Mailing Address 5522 Hertford Dr

City Troy State MI Zip Code 48085-3235

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Health Care Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1915079223244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Ronald Arambula

Mailing Address 2020 Palmer Dr

City Wixom State MI Zip Code 48393-1247

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager Enterprise Security

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1922368423244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Paul Williams Jr

Mailing Address 20410 Cheyenne

City Detroit State MI Zip Code 48235-1005

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Sr. Auditor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR1933675323244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **630.00**

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 34 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
James Takashima
Mailing Address 695 Pearson St
City Ferndale State MI Zip Code 48220-3302
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Analyst - Senior
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR1933677823244
Amount of Each Receipt this Period 182.00
P/R Deduction (\$13.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Bill Ladouceur
Mailing Address 156 Wadsworth Lane
City Bloomfield Hills State MI Zip Code 48301-3342
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR1933678023244
Amount of Each Receipt this Period 182.00
P/R Deduction (\$13.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Brian Vestergaard
Mailing Address 2729 Toby Dr
City Brighton State MI Zip Code 48114-8949
FEC ID number of contributing federal political committee. **C**
Name of Employer LifeSecure Occupation VP Product And Marketing
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR1933680823244
Amount of Each Receipt this Period 140.00
P/R Deduction (\$8.00 Bi-W-ekely)

SUBTOTAL of Receipts This Page (optional) ▶ 504.00
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 35 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Rishi Chandra

Mailing Address 18052 Curtis Ct

City Livonia State MI Zip Code 48152-3589

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Technology Specialist Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR1933680923244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Anthony Beaulieu

Mailing Address 1864 Phillips Ave

City Berkley State MI Zip Code 48072-3223

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Technical Systems Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR1933683023244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$9.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Michael Allie

Mailing Address 25603 Arcadia Dr

City Novi State MI Zip Code 48374-0000

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR1933686423244

Amount of Each Receipt this Period 406.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **658.00**

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 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Terrence Rush	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 47185 Marisa Ct	Transaction ID: PR1933687623244
	City Plymouth State MI Zip Code 48170-3491	Amount of Each Receipt this Period 252.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager-Regional Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 468.00	P/R Deduction (\$18.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Thomas Borgula	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 35831 Candlewood	Transaction ID: PR1933688023244
	City Sterling Heights State MI Zip Code 48312-4125	Amount of Each Receipt this Period 252.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 468.00	P/R Deduction (\$18.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Earline Jenkins Cunningham	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 28170 Shenandoah	Transaction ID: PR1933688123244
	City Southfield State MI Zip Code 48076-5588	Amount of Each Receipt this Period 182.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 338.00	P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	686.00
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 37 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Miriam Burch

Mailing Address 21985 Ember Ct

City State Zip Code
Grosse Ile MI 48138-3001

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR1933689523244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Richard Ward

Mailing Address 6710 Riverside Dr E

City State Zip Code
Windsor ON N8S 1-B9

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
VP Clin Pgms & Med Infomtcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1170.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR1933690023244

Amount of Each Receipt this Period
630.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Tricia Keith

Mailing Address 1918 Lloyd Ave

City State Zip Code
Royal Oak MI 48073-3803

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
VP Corporate Secy & Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1170.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR1933690123244

Amount of Each Receipt this Period
630.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **1512.00**

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 38 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
James Pranschke

Mailing Address 36025 Grennada

City Livonia State MI Zip Code 48154-5241

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR1933693323244

Amount of Each Receipt this Period 406.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Anna Oskui

Mailing Address 401 McKinley

City Grosse Pointe Farm State MI Zip Code 48236-3241

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR1933694223244

Amount of Each Receipt this Period 182.00

P/R Deduction (\$13.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Faisal Khan

Mailing Address 1091 Beaver Run

City Troy State MI Zip Code 48083-5458

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Portfolio Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR1933697123244

Amount of Each Receipt this Period 252.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **840.00**

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 39 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial) William Parker		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 4509 Oakmont Ct		Transaction ID: PR2083440823244
City Shelby Township	State MI	Zip Code 48317-4031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Director	P/R Deduction (\$9.00 Bi-W- eekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

B.

Full Name (Last, First, Middle Initial) Sue Howard		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 2047 Hidden Meadows Drive Unit C		Transaction ID: PR2083441123244
City Walled Lake	State MI	Zip Code 48390-0000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
Name of Employer LifeSecure	Occupation TBD-Manager & Above	P/R Deduction (\$9.00 Bi-W- eekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

C.

Full Name (Last, First, Middle Initial) Limin Zhang		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 3190 Otter Creek Ct		Transaction ID: PR2083442423244
City Ann Arbor	State MI	Zip Code 48105-9268
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Application Developer Adv	P/R Deduction (\$9.00 Bi-W- eekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

SUBTOTAL of Receipts This Page (optional)	▶	378.00
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 40 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Srividya Thyagarajan		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address Strawberry Ln Apt-Bldg 10 27264 St Apt 103		Transaction ID: PR2083442823244		
	City Farmington Hills	State MI	Zip Code 48334-5036	Amount of Each Receipt this Period 182.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$13.00 Bi-Weekly)		
	Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager		Aggregate Year-to-Date 338.00

B.	Full Name (Last, First, Middle Initial) Gopala Molakaluri		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 1601 Deerhurst Lane		Transaction ID: PR2083443023244		
	City Rochester Hills	State MI	Zip Code 48307-3329	Amount of Each Receipt this Period 140.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.00 Bi-Weekly)		
	Name of Employer Blue Cross Blue Shield of Michigan		Occupation Tech Solutions Architect		Aggregate Year-to-Date 260.00

C.	Full Name (Last, First, Middle Initial) Stefanie Thornton		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 13449 Diegel Dr		Transaction ID: PR2083444623244		
	City Shelby Township	State MI	Zip Code 48315-1342	Amount of Each Receipt this Period 182.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$13.00 Bi-Weekly)		
	Name of Employer Blue Cross Blue Shield of Michigan		Occupation Director		Aggregate Year-to-Date 338.00

SUBTOTAL of Receipts This Page (optional)	504.00
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 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Rajesh Vunnam		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 24980 Woodridge Dr Apt 301		Transaction ID: PR2083450623244
	City Farmington Hills	State MI	Zip Code 48335-2280
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 182.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Chief Architect	P/R Deduction (\$18.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.00		

B.	Full Name (Last, First, Middle Initial) Mary Moore		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 7732 Hipp		Transaction ID: PR2083466323244
	City Taylor	State MI	Zip Code 48180-2613
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 406.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Director	P/R Deduction (\$29.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.00		

C.	Full Name (Last, First, Middle Initial) Elizabeth Essien		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 2400 Fullerton		Transaction ID: PR2083466723244
	City Detroit	State MI	Zip Code 48238-3521
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Analyst	P/R Deduction (\$9.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional)	▶	714.00
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 42 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Mary Bores

Mailing Address 21130 Audette

City State Zip Code
Dearborn MI 48124-3022

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2124823723244
Amount of Each Receipt this Period: 182.00
P/R Deduction (\$13.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Julie Sailus

Mailing Address 2706 Homeplace St

City State Zip Code
Dearborn MI 48124-4450

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager-Account

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2124824723244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Charlotte E. Boyer

Mailing Address 38529 Wellington Dr

City State Zip Code
Clinton Twp MI 48036-3520

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Team Leader I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2124824923244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$6.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **434.00**

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 43 / 386

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Kerrie Kaminski

Mailing Address 604 S Edgeworth Ave

City State Zip Code
Royal Oak MI 48067-4050

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 338.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2124825223244

Amount of Each Receipt this Period

182.00

P/R Deduction (\$13.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Donna Strickland

Mailing Address 428 Lynch

City State Zip Code
Pontiac MI 48342-1952

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Analyst - Senior

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2124825623244

Amount of Each Receipt this Period

126.00

P/R Deduction (\$9.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Sarilyn Hogan

Mailing Address 4180 Cross Road

City State Zip Code
White Lake MI 48386-1207

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

Name of Employer Occupation
LifeSecure Director

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 394.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2124827723244

Amount of Each Receipt this Period

126.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

434.00

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 44 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
James Simmon

Mailing Address 1269 Roslyn Rd

City State Zip Code
Grs Pte Woods MI 48236-1385

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2125156123244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Sharon Gipson

Mailing Address 33983 Brittany Dr

City State Zip Code
Farmington Hills MI 48335-1427

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director Asst Gen Auditor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2139035023244
Amount of Each Receipt this Period: 630.00
P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Gregory Durkee

Mailing Address 46304 Green Valley Ct

City State Zip Code
Plymouth MI 48170-3526

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Mgr Ind Insid Sales Telmktg

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2143520223244
Amount of Each Receipt this Period: 182.00
P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 1064.00

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 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Raymond Sohn Jr	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 1029 Rock Spring Road	Transaction ID: PR2143520323244
	City State Zip Code Bloomfield Hills MI 48304-3145	Amount of Each Receipt this Period 261.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 609.00	P/R Deduction (\$29.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Tiffany Moss	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address PO Box 1032	Transaction ID: PR2143520623244
	City State Zip Code Mount Clemens MI 48046-1032	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Analyst - Senior Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 234.00	P/R Deduction (\$9.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Pandora Powell	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 21888 Colony Park Circle #108	Transaction ID: PR2143521123244
	City State Zip Code Southfield MI 48076-5205	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Compliance Bus Unit Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 234.00	P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	513.00
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 / 386
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Jeffrey Connolly		Date of Receipt
	Mailing Address 3650 Bluff Ridge Rd		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Traverse City	MI	49686-8648
	FEC ID number of contributing federal political committee. C		Transaction ID: PR2150990723244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation VP BCBSM&Pres W MI Ops&MGD Car	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1560.00"/>	<input type="text" value="840.00"/>
			P/R Deduction (\$60.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Jennifer Flonoury		Date of Receipt
	Mailing Address 4965 Heather Dr Apt 212		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Dearborn	MI	48126-4175
	FEC ID number of contributing federal political committee. C		Transaction ID: PR2161831323244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Analyst - Senior	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="234.00"/>	<input type="text" value="126.00"/>
			P/R Deduction (\$9.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Jeffrey Coulter		Date of Receipt
	Mailing Address 2009 Cedaredge Rd		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Rochester Hills	MI	48306-3104
	FEC ID number of contributing federal political committee. C		Transaction ID: PR2161834923244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Team Leader-Communications	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="234.00"/>	<input type="text" value="126.00"/>
			P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1092.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Kristen Kangas-Kraft

Mailing Address 1219 S Swegles St

City State Zip Code
Saint Johns MI 48879-2321

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2161835223244
Amount of Each Receipt this Period: 406.00
P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Karriem Shakoor

Mailing Address 4822 Trailview

City State Zip Code
West Bloomfield MI 48322-4572

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Sr Dir IT Systems Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2161835423244
Amount of Each Receipt this Period: 406.00
P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Kurt Barr

Mailing Address 991 N Oxford Rd

City State Zip Code
Grosse Pointe Wood MI 48236-1859

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2161837223244
Amount of Each Receipt this Period: 406.00
P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **1218.00**

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 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Richard Williams	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 43971 Columbia Dr	Transaction ID: PR2161837423244
	City State Zip Code Clinton Twp MI 48038-1327	Amount of Each Receipt this Period 252.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 468.00	P/R Deduction (\$18.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Michael Dunn	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 27440 Lathrup Blvd	Transaction ID: PR2161837623244
	City State Zip Code Lathrup Village MI 48076-3575	Amount of Each Receipt this Period 406.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 754.00	P/R Deduction (\$29.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Keith Gregory	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 16231 Mansfield St	Transaction ID: PR2161838323244
	City State Zip Code Detroit MI 48235-3630	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Team Leader I Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 234.00	P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	784.00
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 49 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

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

Mailing Address 3773 Shellmarr Ln

City Bloomfield Hills State MI Zip Code 48302-4052

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Consultant-Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR2161839023244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Christine Farah

Mailing Address 9000 Fellows Creek Dr

City Plymouth State MI Zip Code 48170-6354

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation VP Middle & Small Grp Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR2161841223244
 Amount of Each Receipt this Period 840.00
 P/R Deduction (\$45.00 Bi-Weekly)

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

Mailing Address 3100 N Milford Rd

City Highland State MI Zip Code 48357-3549

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation SVP & COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR2161842423244
 Amount of Each Receipt this Period 840.00
 P/R Deduction (\$60.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 1806.00

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 50 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Melissa Frankel-Wagner</p> <p>Mailing Address 67875 Pinewood Ln</p> <p>City State Zip Code Richmond MI 48062-5904</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Dentemax Occupation VP Sales & Marketing</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 585.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 9</p> <p>Transaction ID: PR2161842923244</p> <p>Amount of Each Receipt this Period 45.00</p> <p>P/R Deduction (\$45.00 Bi-Weekly)</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) Kimberly Sharbatz</p> <p>Mailing Address 21431 Newcastle Rd</p> <p>City State Zip Code Harper Woods MI 48225-2363</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Dentemax Occupation Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 234.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 9</p> <p>Transaction ID: PR2161843023244</p> <p>Amount of Each Receipt this Period 18.00</p> <p>P/R Deduction (\$18.00 Bi-Weekly)</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) David Hetrick</p> <p>Mailing Address 7242 E Cortez Rd</p> <p>City State Zip Code Scottsdale AZ 85260-5459</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Dentemax Occupation Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 234.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 9</p> <p>Transaction ID: PR2161844223244</p> <p>Amount of Each Receipt this Period 18.00</p> <p>P/R Deduction (\$18.00 Bi-Weekly)</p>
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SUBTOTAL of Receipts This Page (optional)	81.00
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 51 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial) Martin Risedorph		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 590 Terrace Ln E		Transaction ID: PR2161847623244
City Ypsilanti	State MI	Zip Code 48198-3044
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.00
Name of Employer Dentemax	Occupation Director	P/R Deduction (\$18.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

B.

Full Name (Last, First, Middle Initial) Robert Milewski		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 59769 Glacier Club Dr		Transaction ID: PR2163136423244
City Washington Twp	State MI	Zip Code 48094-2287
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 840.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation SVP Ops & Health Care Value	P/R Deduction (\$60.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1560.00	

C.

Full Name (Last, First, Middle Initial) Jane Schafer		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 4281 Cahokia Rdg		Transaction ID: PR2163136523244
City Linden	State MI	Zip Code 48451-8435
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 210.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Dir Claims Administration	P/R Deduction (\$10.00 Bi-Weekly)
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)	▶	1068.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Michael Herberger	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 2126 Pauls Way	Transaction ID: PR2212063023244
	City State Zip Code Commerce Township MI 48390-3228	Amount of Each Receipt this Period 140.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Application Developer Adv Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 260.00	P/R Deduction (\$10.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Anthony Wojnar	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 32948 Hees	Transaction ID: PR2212063823244
	City State Zip Code Livonia MI 48150-3773	Amount of Each Receipt this Period 140.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Project Manager Senior Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 260.00	P/R Deduction (\$10.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Leon Wilson	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 4230 Woodcrest Ct	Transaction ID: PR2212064023244
	City State Zip Code Ypsilanti MI 48197-0000	Amount of Each Receipt this Period 210.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 390.00	P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	490.00
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 53 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Marla Nicholas	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 144 Mohawk	Transaction ID: PR2212065823244
	City State Zip Code Dearborn MI 48124-1322	Amount of Each Receipt this Period 182.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00	P/R Deduction (\$18.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Laurie Kelly	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 498 N Evergreen St	Transaction ID: PR2212073423244
	City State Zip Code Plymouth MI 48170-1130	Amount of Each Receipt this Period 182.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Consultant Product Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00	P/R Deduction (\$6.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Mary Murphy	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 16196 Madoline	Transaction ID: PR2212073523244
	City State Zip Code Beverly Hills MI 48025-5626	Amount of Each Receipt this Period 182.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Consultant Product Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00	P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	546.00
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 54 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Kelley Monterusso

Mailing Address 11725 Forestwood Drive

City State Zip Code
Cedar Springs MI 49319-8236

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director - Regional Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2212073923244
Amount of Each Receipt this Period: 406.00
P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Laurie Wesolowicz

Mailing Address 17455 Maple Hill Dr

City State Zip Code
Northville MI 48168-3225

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2212075123244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$9.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Douglas Grupenhoff

Mailing Address 3263 Foothills Ct

City State Zip Code
Lake Orion MI 48359-1586

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager - Project

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2212075223244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **784.00**

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 55 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
James Lang
 Mailing Address 9050 Carter Dr
 City Saline State MI Zip Code 48176-8006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Cross Blue Shield of Michigan Occupation VP Pharmacy Services
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1170.00
 Date of Receipt 12 / 31 / 2009
Transaction ID: PR2212084723244
 Amount of Each Receipt this Period 630.00
 P/R Deduction (\$45.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Darrell Middleton
 Mailing Address 5669 Shore Dr
 City Orchard Lake State MI Zip Code 48324-2966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Cross Blue Shield of Michigan Occupation SVP Bus Effic & Human Perf
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1560.00
 Date of Receipt 12 / 31 / 2009
Transaction ID: PR2212084823244
 Amount of Each Receipt this Period 840.00
 P/R Deduction (\$60.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
M Goheen
 Mailing Address 46655 Pinehurst Cir
 City Northville State MI Zip Code 48168-8488
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Cross Blue Shield of Michigan Occupation VP Human Resources
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1170.00
 Date of Receipt 12 / 31 / 2009
Transaction ID: PR2212084923244
 Amount of Each Receipt this Period 630.00
 P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 2100.00
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 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) JoAnn Hockin		Date of Receipt
	Mailing Address 3888 Corran Dr		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Wixom	MI	48393-4400
	FEC ID number of contributing federal political committee. C		Transaction ID: PR2212087023244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="338.00"/>	<input type="text" value="182.00"/>
			P/R Deduction (\$13.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Steven Jones		Date of Receipt
	Mailing Address 3931 Sashabaw Road		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Waterford	MI	48329-2072
	FEC ID number of contributing federal political committee. C		Transaction ID: PR2212087223244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Underwriter Senior	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="234.00"/>	<input type="text" value="126.00"/>
			P/R Deduction (\$13.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Amy Richardson		Date of Receipt
	Mailing Address 20981 Laser Ln		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	South Lyon	MI	48178-9222
	FEC ID number of contributing federal political committee. C		Transaction ID: PR2212090823244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager Customer Service	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="390.00"/>	<input type="text" value="210.00"/>
			P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="518.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Taryn Reinhart

Mailing Address 5723 Martell Dr

City State Zip Code
Troy MI 48085-3162

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Manager Medical Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR2212092223244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Michael Fulkerson Jr

Mailing Address 300 Hamilton #105

City State Zip Code
Plymouth MI 48170-7202

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Manager Membership

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR2212093323244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Martha Richard

Mailing Address 2237 N Parker Rd

City State Zip Code
Dexter MI 48130-9470

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Dir Special Clinical Programs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR2212093623244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **630.00**

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 58 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Duane DiFranco

Mailing Address 11817 Hunters Creek Ct

City State Zip Code
Plymouth Township MI 48170-2822

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Regional Med Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2212094323244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Elaina Lee

Mailing Address 27861 Weymouth Dr

City State Zip Code
Farmington Hills MI 48334-3247

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Mgr Oper Srv Improvement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2212097023244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Jill Jarvela

Mailing Address 7436 Charrington Drive

City State Zip Code
Canton MI 48187-1819

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Lead Systems Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2212097323244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$6.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **910.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 386

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Kim Nash

Mailing Address 1834 Graefield Rd

City State Zip Code
Birmingham MI 48009-5848

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager Customer Service

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212097723244

Amount of Each Receipt this Period

126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
Lynda Longshore

Mailing Address 555 Brush St
Apt 1102

City State Zip Code
Detroit MI 48226-4353

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Administrative Coord

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212098523244

Amount of Each Receipt this Period

126.00

P/R Deduction (\$10.00 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)
Henry Stasek

Mailing Address 845 N Mildred

City State Zip Code
Dearborn MI 48128-1732

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Corp Website Project Manager

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 338.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212098623244

Amount of Each Receipt this Period

182.00

P/R Deduction (\$13.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

434.00

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 60 / 386

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

James Haskins IV

Mailing Address 823 E 3rd St

City State Zip Code
Royal Oak MI 48067-2844

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Administrator

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 468.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212100323244

Amount of Each Receipt this Period

252.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Amienne Frenzel

Mailing Address 4591 Covered Bridge

City State Zip Code
Bloomfield Hills MI 48302-1831

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan VP Service Operations

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1170.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212103323244

Amount of Each Receipt this Period

630.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Keith Adkins

Mailing Address 4371 Fieldview

City State Zip Code
Grand Ledge MI 48837

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

Name of Employer Occupation
Accident Fund Insurance Company of Ame VP, Marketing

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1170.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212272523244

Amount of Each Receipt this Period

630.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1512.00

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 61 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Mark Alexander

Mailing Address 305 Windyrush Lane

City DeWitt State MI Zip Code 48820

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

Name of Employer: Accident Fund Insurance Company of Ame
Occupation: Project Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2212272623244
 Amount of Each Receipt this Period: 210.00
 P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Linda Barnes

Mailing Address 697 W Lansing Rd

City Morrice State MI Zip Code 48857

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

Name of Employer: Accident Fund Insurance Company of Ame
Occupation: VP, Service Center

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 978.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2212272923244
 Amount of Each Receipt this Period: 630.00
 P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Alison Arambula

Mailing Address 625 Worthington Dr

City Lansing State MI Zip Code 48906

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

Name of Employer: Accident Fund Insurance Company of Ame
Occupation: Claims Examiner II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2212273123244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **966.00**

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 62 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Donald Bearden		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 1414 Wellington Road		Transaction ID: PR2212273223244
	City Lansing	State MI	Zip Code 48910
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 406.00
	Name of Employer Accident Fund Insurance Company of Ame	Occupation Corporate Medical Director	P/R Deduction (\$29.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.00		

B.	Full Name (Last, First, Middle Initial) Alex Bedoway		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 5076 Pentwater Drive		Transaction ID: PR2212273423244
	City Howell	State MI	Zip Code 48843
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 182.00
	Name of Employer Accident Fund Company	Occupation Enterprise Risk Mgmt Advisor	P/R Deduction (\$14.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.00		

C.	Full Name (Last, First, Middle Initial) Julie Brennan		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 2906 Colony Dr		Transaction ID: PR2212274023244
	City East Lansing	State MI	Zip Code 48823
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 182.00
	Name of Employer Accident Fund Insurance Company of Ame	Occupation Office Manager	P/R Deduction (\$13.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.00		

SUBTOTAL of Receipts This Page (optional)	770.00
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 63 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Michael Britt

Mailing Address 5439 Timberbend Drive

City State Zip Code
Brighton MI 48116

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
President AF Ins Co of America

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1560.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR2212274123244

Amount of Each Receipt this Period
840.00

P/R Deduction (\$60.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Kristie Burger

Mailing Address 319 Kenway Dr.

City State Zip Code
Lansing MI 48917

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

Name of Employer
Accident Fund Company

Occupation
Manager, Operations Training

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
338.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR2212274423244

Amount of Each Receipt this Period
182.00

P/R Deduction (\$13.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Scott Burgess

Mailing Address 2714 West Kinneville Rd.

City State Zip Code
Leslie MI 49251

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
Communications Specialist -Adv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR2212274523244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **1148.00**

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 64 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Faith Bushard

Mailing Address 932 S. Osborne Rd.

City Dansville State MI Zip Code 48819

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

Name of Employer Accident Fund Insurance Company of Ame Occupation Manager, Entpse Decsn Support

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR2212274723244

Amount of Each Receipt this Period 140.00

P/R Deduction (\$10.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Martin Chapko

Mailing Address 4141 S St. Clair Rd

City St Johns State MI Zip Code 48879

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

Name of Employer Accident Fund Company Occupation Manager, Financial Reporting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR2212275123244

Amount of Each Receipt this Period 140.00

P/R Deduction (\$10.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Susan Coles

Mailing Address 3575 Josephine Lane

City Mason State MI Zip Code 48854

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

Name of Employer Accident Fund Company Occupation Manager, Nurse Case Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR2212275923244

Amount of Each Receipt this Period 140.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **420.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Mickey Collier	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 1101 Hawks Ridge	Transaction ID: PR2212276023244
	City State Zip Code Grand Ledge MI 48837	Amount of Each Receipt this Period 182.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Accident Fund Insurance Company of Ame Occupation Supervisor, Interim Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00	P/R Deduction (\$13.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Patricia Cook	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 542 Dorchester Way	Transaction ID: PR2212276223244
	City State Zip Code Milford MI 48381	Amount of Each Receipt this Period 252.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Accident Fund Company Occupation Manager, Claims Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 468.00	P/R Deduction (\$18.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Martin Cook	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 731 Manor Dr.	Transaction ID: PR2212276323244
	City State Zip Code Milford MI 48381	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Accident Fund Company Occupation Claims Examiner III Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00	P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	560.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Stephan Cooper		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 6456 Island Lake Drive		Transaction ID: PR2212276623244
	City East Lansing	State MI	Zip Code 48823
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 630.00
	Name of Employer Accident Fund Insurance Company of Ame	Occupation VP, Claims & TPA Operations	P/R Deduction (\$60.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1170.00		

B.	Full Name (Last, First, Middle Initial) Roni Klungle		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 2245 Main		Transaction ID: PR2212276923244
	City Holt	State MI	Zip Code 48842
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 140.00
	Name of Employer Accident Fund Company	Occupation Manager, Cash & Collections	P/R Deduction (\$11.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

C.	Full Name (Last, First, Middle Initial) Lisa Crozier		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 7269 Pine Vista		Transaction ID: PR2212277123244
	City Brighton	State MI	Zip Code 48116
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 630.00
	Name of Employer Accident Fund Insurance Company of Ame	Occupation VP, Claims Operations	P/R Deduction (\$45.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1135.00		

SUBTOTAL of Receipts This Page (optional)	▶	1400.00
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 67 / 386

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Jodi Enriquez

Mailing Address 618 Hunter Boulevard

City State Zip Code
Lansing MI 48910

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

Name of Employer Occupation
Accident Fund Insurance Business Systems Analyst II
Company of Ame

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212278223244

Amount of Each Receipt this Period

126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)

Jerry Fuller

Mailing Address 1507 Park Avenue

City State Zip Code
Lansing MI 48910

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

Name of Employer Occupation
Accident Fund Insurance Contract Coordinator
Company of Ame

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212279923244

Amount of Each Receipt this Period

126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

C.

Full Name (Last, First, Middle Initial)

Alan Gileczek

Mailing Address 7053 N Lake Orchard Drive

City State Zip Code
Gregory MI 48137

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

Name of Employer Occupation
Accident Fund Insurance VP, BD Regional Operations
Company of Ame

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1170.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212280723244

Amount of Each Receipt this Period

630.00

P/R Deduction (\$45.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional) ▶

882.00

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 68 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Janet Gilliland

Mailing Address 2865 Highgate

City East Lansing State MI Zip Code 48823

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

Name of Employer
Accident Fund Insurance Company of Ame
Occupation
Manager, IS Standards

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212280923244

Amount of Each Receipt this Period
182.00

P/R Deduction (\$13.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Finnette Goodyear

Mailing Address 418 S. White Oak Dr.

City Perry State MI Zip Code 48872

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

Name of Employer
Accident Fund Insurance Company of Ame
Occupation
Business Systems Analyst III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212281223244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Dale Gores

Mailing Address 3380 East M-21 Hwy.

City St. Johns State MI Zip Code 48879-9004

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

Name of Employer
Accident Fund Insurance Company of Ame
Occupation
Director, Information Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212281323244

Amount of Each Receipt this Period
140.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 448.00

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 69 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Dawn Gorman

Mailing Address 4611 Addison Rd.

City State Zip Code
Lansing MI 48917

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
Senior Communicatn Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212281423244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B.

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

Mailing Address 2272 Pleasant Ridge

City State Zip Code
Howell MI 48843

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
Business Dev Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212282523244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

C.

Full Name (Last, First, Middle Initial)
Andrew Hazel

Mailing Address 303 E Lovett St

City State Zip Code
Charlotte MI 48813

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
Strategic Planning Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212282723244

Amount of Each Receipt this Period
182.00

P/R Deduction (\$13.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional) ► **434.00**

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 70 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Steven Hess

Mailing Address 5290 Park Lake Road

City State Zip Code
East Lansing MI 48823-3800

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
EVP, General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1560.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212283023244

Amount of Each Receipt this Period
840.00

P/R Deduction (\$60.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Myra Hiske

Mailing Address 525 Grovenburg Road

City State Zip Code
Mason MI 48854

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
Executive Office Liaison

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212283423244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$10.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Dean Holland

Mailing Address 801 Woodbury

City State Zip Code
Grand Ledge MI 48837

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
Senior Corp Claims Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
338.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212283723244

Amount of Each Receipt this Period
182.00

P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **1148.00**

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 71 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Rebecca Holnagel		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 5482 Maple Ridge		Transaction ID: PR2212283923244
	City Haslett	State MI	Zip Code 48840
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 252.00
	Name of Employer Accident Fund Company	Occupation Director, Actuary	P/R Deduction (\$29.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00		

B.	Full Name (Last, First, Middle Initial) Karen Holtz		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 945 Chads Way		Transaction ID: PR2212284023244
	City Charlotte	State MI	Zip Code 48813
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
	Name of Employer Accident Fund Company	Occupation Claims Quality Specialist	P/R Deduction (\$9.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00		

C.	Full Name (Last, First, Middle Initial) Gregory Howard		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 2102 Winners Circle		Transaction ID: PR2212284223244
	City St. Johns	State MI	Zip Code 48879
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 280.00
	Name of Employer Accident Fund Insurance Company of Ame	Occupation Regional Mgr, Bus Development	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00		

SUBTOTAL of Receipts This Page (optional)	▶	658.00
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 72 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Merrick Hurlbutt

Mailing Address 5604 Wood Valley

City Haslett State MI Zip Code 48840

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

Name of Employer: Accident Fund Insurance Company of Ame
Occupation: Manager, Claims

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2212284523244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Christine Ishraidi

Mailing Address 14878 Shamrock Trail

City Lansing State MI Zip Code 48906

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

Name of Employer: Accident Fund Insurance Company of Ame
Occupation: Manager, Claims

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2212284823244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$13.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Paul Kauffman

Mailing Address 6091 Balmoral Way

City Commerce Township State MI Zip Code 48382

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

Name of Employer: Accident Fund Insurance Company of Ame
Occupation: Director, Medical Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2212285623244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 686.00

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 73 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Kerilyn Kittmann
Mailing Address 4325 Chancellor Drive
City DeWitt State MI Zip Code 48820
FEC ID number of contributing federal political committee. **C**
Name of Employer Accident Fund Insurance Company of Ame Occupation Director, Accounting
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 754.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR2212286023244
Amount of Each Receipt this Period 406.00
P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Rhett Kukulski
Mailing Address 553 Avocet Drive
City East Lansing State MI Zip Code 48823
FEC ID number of contributing federal political committee. **C**
Name of Employer Accident Fund Insurance Company of Ame Occupation Claims Examiner I
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR2212286723244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$9.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Teresa Lambie
Mailing Address 13230 Hide Away
City Dewitt State MI Zip Code 48820
FEC ID number of contributing federal political committee. **C**
Name of Employer Accident Fund Insurance Company of Ame Occupation Manager, Web Services
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR2212287123244
Amount of Each Receipt this Period 182.00
P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 714.00
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 74 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Lorelee McCleary
Mailing Address 3753 Ivy Lane
City State Zip Code
Dewitt MI 48820
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Accident Fund Insurance Automation Specialist
Company of Ame
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 234.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9
Transaction ID: PR2212288823244
Amount of Each Receipt this Period
126.00
P/R Deduction (\$9.00 Bi-W-
eekly)

B. Full Name (Last, First, Middle Initial)
Charles McGeehan
Mailing Address 201 S River Street
City State Zip Code
Eaton Rapids MI 48827
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Accident Fund Insurance Manager, Claims
Company of Ame
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 468.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9
Transaction ID: PR2212289123244
Amount of Each Receipt this Period
252.00
P/R Deduction (\$18.00 Bi-
Weekly)

C. Full Name (Last, First, Middle Initial)
Arthur Miller III
Mailing Address 802 Carom Circle
City State Zip Code
Mason MI 48854
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Accident Fund Insurance Legislative Analyst
Company of Ame
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 390.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9
Transaction ID: PR2212289823244
Amount of Each Receipt this Period
210.00
P/R Deduction (\$15.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional) ► 588.00
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 75 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Troy Mounsey

Mailing Address 12632 Oneida Woods Trail

City State Zip Code
Grand Ledge MI 48837

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
Regional Mgr, Bus Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212290423244

Amount of Each Receipt this Period
182.00

P/R Deduction (\$13.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Jaime Mullen

Mailing Address 5935 Cartago Drive

City State Zip Code
Lansing MI 48911

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
Manager, IS Bus Relationships

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212290723244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Anthony Phillips

Mailing Address 8697 North Hills Ct.

City State Zip Code
Howell MI 48843

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
VP, Chief RO & Chief Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212292823244

Amount of Each Receipt this Period
630.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **1064.00**

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 76 / 386
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Rita Ramsey		Date of Receipt
	Mailing Address 210 Mark Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Mason	MI	48854
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Accident Fund Insurance Company of Ame		Occupation Manager, Service Center	Transaction ID: PR2212294023244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="468.00"/>	
		Amount of Each Receipt this Period <input type="text" value="252.00"/>	
		P/R Deduction (\$13.00 Bi-Weekly)	

B.	Full Name (Last, First, Middle Initial) Michael Reibsome		Date of Receipt
	Mailing Address 3550 Laureate Dr		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Holt	MI	48842
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Accident Fund Insurance Company of Ame		Occupation Creative Specialist	Transaction ID: PR2212294523244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	
		Amount of Each Receipt this Period <input type="text" value="140.00"/>	
		P/R Deduction (\$15.00 Bi-Weekly)	

C.	Full Name (Last, First, Middle Initial) Michael Reid		Date of Receipt
	Mailing Address 2333 El Dorado Dr. SE		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	East Grand Rapids	MI	49506
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Accident Fund Insurance Company of Ame		Occupation Senior Corp Claims Consultant	Transaction ID: PR2212294623244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="468.00"/>	
		Amount of Each Receipt this Period <input type="text" value="252.00"/>	
		P/R Deduction (\$18.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="644.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Steven Reynolds	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 12416 Golden Oaks Dr	Transaction ID: PR2212294823244
	City State Zip Code Milford MI 48380	Amount of Each Receipt this Period 630.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Accident Fund Insurance Company of Ame	Occupation VP, Strtg Pln & Corp Secretary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1170.00	

B.	Full Name (Last, First, Middle Initial) Gail Robins	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 1851 Persimmon Path	Transaction ID: PR2212295423244
	City State Zip Code Holt MI 48842	Amount of Each Receipt this Period 182.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$13.00 Bi-Weekly)
Name of Employer Accident Fund Insurance Company of Ame	Occupation Manager, Claims	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.00	

C.	Full Name (Last, First, Middle Initial) Ronald Schoen	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 121 Swallowtail Lane	Transaction ID: PR2212296323244
	City State Zip Code Okemos MI 48864	Amount of Each Receipt this Period 700.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Accident Fund Insurance Company of Ame	Occupation EVP, & Chief Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional)	1512.00
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 78 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Jane Scollon

Mailing Address 11538 E.Stoney Creek

City State Zip Code
Pewamo MI 48873

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
Manager, Claims

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212296523244

Amount of Each Receipt this Period
140.00

P/R Deduction (\$6.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
Jennifer Scott

Mailing Address 720 Williams Street

City State Zip Code
Williamston MI 48895

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
Senior Communicatn Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212296823244

Amount of Each Receipt this Period
140.00

P/R Deduction (\$6.00 Bi-W-
eekly)

C.

Full Name (Last, First, Middle Initial)
Michael Sekoni

Mailing Address 16590 Broadview Dr.

City State Zip Code
East Lansing MI 48823

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
VP, & General Auditor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1170.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212297023244

Amount of Each Receipt this Period
630.00

P/R Deduction (\$45.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional) ► **910.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Michael Seling
Mailing Address 8610 Carlsbad Lane
City Lansing State MI Zip Code 48917
FEC ID number of contributing federal political committee. **C**
Name of Employer Accident Fund Insurance Company of Ame Occupation Regional Mgr, Bus Development
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 468.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR2212297123244
Amount of Each Receipt this Period 252.00
P/R Deduction (\$13.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Anne Staples
Mailing Address 5923 Eagles Way
City Haslett State MI Zip Code 48840
FEC ID number of contributing federal political committee. **C**
Name of Employer Accident Fund Company Occupation Manager, Service Center
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR2212298023244
Amount of Each Receipt this Period 182.00
P/R Deduction (\$13.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Ellen Stille
Mailing Address 924 Rolfe Rd
City Mason State MI Zip Code 48854
FEC ID number of contributing federal political committee. **C**
Name of Employer Accident Fund Company Occupation Manager, Service Center
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR2212298223244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 560.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 80 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Kelly Sudderth
Mailing Address 3726 Kiskadee Drive
City East Lansing State MI Zip Code 48823
FEC ID number of contributing federal political committee. **C**
Name of Employer Accident Fund Insurance Company of Ame Occupation Manager, Str Pln & Bd Relation
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR2212298423244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$18.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Bethany Taylor
Mailing Address 544 N Dexter
City Lansing State MI Zip Code 48910
FEC ID number of contributing federal political committee. **C**
Name of Employer Accident Fund Insurance Company of Ame Occupation Senior Communicatn Specialist
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR2212298723244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$6.00 Bi-W-ekly)

C. Full Name (Last, First, Middle Initial)
Peter Torres
Mailing Address 9465 Vermontville Hwy
City Dimondale State MI Zip Code 48821
FEC ID number of contributing federal political committee. **C**
Name of Employer Accident Fund Insurance Company of Ame Occupation Manager, IS planning
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR2212299323244
Amount of Each Receipt this Period 140.00
P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 392.00
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 81 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Tanya Roche

Mailing Address 1100 Onondaga Road

City State Zip Code
Holt MI 48842

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

Name of Employer
Accident Fund Insurance Company of Ame
Occupation
Manager, Service Center

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	9	

Transaction ID: PR2212299623244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Catherine Whitford

Mailing Address 1250 W Marshall Rd

City State Zip Code
St Johns MI 48879

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

Name of Employer
Accident Fund Insurance Company of Ame
Occupation
Corporate Claims Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	9	

Transaction ID: PR2212300623244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-Weekly)

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

Mailing Address 31305 Beechwood

City State Zip Code
Warren MI 48088

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

Name of Employer
Accident Fund Insurance Company of Ame
Occupation
Senior Loss Control Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	9	

Transaction ID: PR2212300923244

Amount of Each Receipt this Period
140.00

P/R Deduction (\$12.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **644.00**

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 82 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Sheri Williams

Mailing Address 3421 Hagan Street

City State Zip Code
Lansing MI 48917

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
Regulatory Rp&Dta Q Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212301023244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
Sheila Wright

Mailing Address 7782 Forestview Drive

City State Zip Code
Haslett MI 48840

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
Director, Underwriting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
754.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212301823244

Amount of Each Receipt this Period
406.00

P/R Deduction (\$29.00 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)
David Zink

Mailing Address 718 Britten

City State Zip Code
Lansing MI 48910

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
Manager, Entpse Cnt Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2212302023244

Amount of Each Receipt this Period
140.00

P/R Deduction (\$10.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **672.00**

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 83 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Steven Zvonar

Mailing Address 3866 New Salem Ave

City Okemos State MI Zip Code 48864

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

Name of Employer Accident Fund Insurance Company of Ame Occupation Web Application Developer III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR2212302123244

Amount of Each Receipt this Period 252.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

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

Mailing Address 4620 Admiral Dr

City Sterling Hts State MI Zip Code 48310-3301

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation VP Business Intelligence

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR2225246923244

Amount of Each Receipt this Period 630.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Equilla Wainwright

Mailing Address 200 River Place Unit 11

City Detroit State MI Zip Code 48207-4397

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation VP Diversity & Comm Respon

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR2225249923244

Amount of Each Receipt this Period 630.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 1512.00

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 84 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Lynda Rossi

Mailing Address 1066 Foxborough Dr

City State Zip Code
Williamston MI 48895-9206

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: VP Soc Mis Pub Affrs&Ofc of Pr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2225250923244
 Amount of Each Receipt this Period: 840.00
 P/R Deduction (\$45.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Rachelle Anderson

Mailing Address 19172 Woodland St

City State Zip Code
Harper Woods MI 48225-2020

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Underwriter Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2225253523244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Janice Simmons

Mailing Address 12630 N Yvonne Dr

City State Zip Code
Mequon WI 53092-2328

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Sr Dir Human Performance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2225257023244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **1372.00**

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 85 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

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

Mailing Address 33657 Chatsworth

City State Zip Code
Strlg Hts MI 48312-0000

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Dir Systems Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2225257323244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Thomas Leyden

Mailing Address 11655 Brownell Avenue

City State Zip Code
Plymouth MI 48170-4408

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2225259623244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$13.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Bryan Boedigheimer

Mailing Address 2201 Marie Dr

City State Zip Code
Lake Orion MI 48360-2298

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Project Manager Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2225259823244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **840.00**

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 86 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Denise Kolen		Date of Receipt
	Mailing Address 14755 Lowe Dr		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Warren	MI	48088-1534
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager-Account	Transaction ID: PR2225324123244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="234.00"/>	
		Amount of Each Receipt this Period <input type="text" value="126.00"/>	
		P/R Deduction (\$9.00 Bi-W- eekly)	

B.	Full Name (Last, First, Middle Initial) Karen Carroll		Date of Receipt
	Mailing Address 3189 Kenwood Dr		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Rochester Hills	MI	48309-2754
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Clinical Pharmacist	Transaction ID: PR2225325123244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="468.00"/>	
		Amount of Each Receipt this Period <input type="text" value="252.00"/>	
		P/R Deduction (\$6.00 Bi-W- eekly)	

C.	Full Name (Last, First, Middle Initial) Stephanie Bracken		Date of Receipt
	Mailing Address 869 Alan Dr		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Lake Orion	MI	48362-2805
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Nurse Case Manager	Transaction ID: PR2229119123244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="234.00"/>	
		Amount of Each Receipt this Period <input type="text" value="126.00"/>	
		P/R Deduction (\$9.00 Bi-W- eekly)	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="504.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 87 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Heather Davis

Mailing Address 5725 Templar Xing

City State Zip Code
West Bloomfield MI 48322-1366

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Nurse Case Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2229119323244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W- weekly)

B.

Full Name (Last, First, Middle Initial)
Jennifer Steinhilber

Mailing Address 203 N Court St

City State Zip Code
Howell MI 48843-0000

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2229122323244
Amount of Each Receipt this Period: 234.00
P/R Deduction (\$18.00 Bi- Weekly)

C.

Full Name (Last, First, Middle Initial)
Kevin Law

Mailing Address 1321 Millcreek Dr

City State Zip Code
Waterford MI 48327-0000

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2229125423244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W- weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **486.00**

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

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

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

FOR LINE NUMBER: PAGE 88 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Jacob Nysson

Mailing Address 555 Brush St
Apt 2505

City State Zip Code
Detroit MI 48226-4356

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Compliance Bus Unit Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2229125923244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
James Robb

Mailing Address 3413 Wolverine Dr

City State Zip Code
Troy MI 48083-6803

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Special Asst to CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2230124323244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Sean Carlson

Mailing Address 4964 Greenview Dr

City State Zip Code
Commerce Twp MI 48382-1561

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 609.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2232097523244
 Amount of Each Receipt this Period: 261.00
 P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 639.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 89 / 386

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Patrice Matejka

Mailing Address 19520 Hillcrest

City Livonia State MI Zip Code 48152-1723

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Director HR Business Partner

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 754.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2232097723244

Amount of Each Receipt this Period

406.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Michael Rosenberg

Mailing Address 38600 Greenbrook Ct

City Farmington Hills State MI Zip Code 48331-2922

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Associate Medical Director

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 208.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2232097923244

Amount of Each Receipt this Period

112.00

P/R Deduction (\$8.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mary Carley

Mailing Address 3731 Eastbourne

City Troy State MI Zip Code 48084-1109

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2232098723244

Amount of Each Receipt this Period

182.00

P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶

700.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 90 / 386

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Justin Gavin

Mailing Address 24500 Hampton Hill

City State Zip Code
Novi MI 48375-0000

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Manager-Account

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2232101723244

Amount of Each Receipt this Period

126.00

P/R Deduction (\$6.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
Kimberly Mayes

Mailing Address 3624 Balfour Rd

City State Zip Code
Detroit MI 48224-3436

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Lead Systems Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2232103923244

Amount of Each Receipt this Period

252.00

P/R Deduction (\$6.00 Bi-W-
eekly)

C.

Full Name (Last, First, Middle Initial)
Peter King III

Mailing Address 21655 Tapert

City State Zip Code
Southfield MI 48075-3822

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Analyst Rating I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2243281023244

Amount of Each Receipt this Period

126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

SUBTOTAL of Receipts This Page (optional) ▶

504.00

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 91 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Jason Gaiser

Mailing Address 657 Mallard Way

City State Zip Code
Oxford MI 48371-4885

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Team Lead Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2243282223244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$6.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Patricia Soyemi

Mailing Address 32151 W 12 Mile Rd

City State Zip Code
Farmington Hills MI 48334-3502

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager-Key Account

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2243282523244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Shirley Glazier

Mailing Address 16384 Brookwood Ct

City State Zip Code
Northville MI 48168-3492

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2247506823244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **784.00**

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 92 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Tina Allen

Mailing Address 12552 Wildcat Cove Cir

City Estero State FL Zip Code 33928-2088

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Attorney Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR2250304823244

Amount of Each Receipt this Period 91.00

P/R Deduction (\$13.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Allison Combs

Mailing Address 4122 Willow Pond Dr

City Ypsilanti State MI Zip Code 48197-1034

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Health Care Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR2250305023244

Amount of Each Receipt this Period 252.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Denise Kuta

Mailing Address 763 Woodhaven Dr

City Commerce Township State MI Zip Code 48390-3299

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager-Account

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR2250306323244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **469.00**

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 93 / 386

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Stacey Repotski

Mailing Address 43984 Cottisford

City State Zip Code
Northville MI 48167-8945

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Clinical Pharmacist

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 468.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2250307623244

Amount of Each Receipt this Period

252.00

P/R Deduction (\$6.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
Mark Owen

Mailing Address 188 N Glenhurst Dr

City State Zip Code
Bloomfield Hills MI 48301-2631

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan VP Federal & Individual Bus

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1170.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2250308123244

Amount of Each Receipt this Period

630.00

P/R Deduction (\$45.00 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)
Ellen Buist

Mailing Address 933 Northwood St

City State Zip Code
Ann Arbor MI 48103-4664

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Health Care Manager

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 338.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2250326323244

Amount of Each Receipt this Period

182.00

P/R Deduction (\$18.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

1064.00

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 94 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
John Ganos
 Mailing Address 316 Abbey Wood Drive
 City State Zip Code
 Rochester MI 48306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Accident Fund Insurance Assistant General Counsel II
 Company of Ame
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 468.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 9
Transaction ID: PR2259844323244
 Amount of Each Receipt this Period
 252.00
 P/R Deduction (\$20.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Athena King
 Mailing Address 3000 Forest Road
 City State Zip Code
 Lansing MI 48910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Accident Fund Insurance Claims Examiner I
 Company of Ame
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 234.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 9
Transaction ID: PR2259844523244
 Amount of Each Receipt this Period
 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mary Mackenzie
 Mailing Address 1534 Creal Crescent
 City State Zip Code
 Ann Arbor MI 48103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Accident Fund Insurance Assistant General Counsel II
 Company of Ame
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 468.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 9
Transaction ID: PR2259844623244
 Amount of Each Receipt this Period
 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 630.00
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 95 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Clyde Scott

Mailing Address 20636 Maple Lane

City State Zip Code
Grosse Pointe Wood MI 48236

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
Assistant General Counsel II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
754.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2259844723244

Amount of Each Receipt this Period
406.00

P/R Deduction (\$31.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Marsha Tracy

Mailing Address 12451 Oakland Hills

City State Zip Code
DeWitt MI 48820

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
Assistant General Counsel II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2259845023244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Richard Weiser

Mailing Address 1939 Oneida Drive

City State Zip Code
Okemos MI 48864

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
Assistant General Counsel II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
754.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2259845123244

Amount of Each Receipt this Period
406.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **1064.00**

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 96 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Jason Welsh

Mailing Address 14031 Manhattan

City State Zip Code
Oak Park MI 48237

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
Assistant General Counsel II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR2259845223244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Richard Zapala

Mailing Address 1915 Creek Landing

City State Zip Code
Haslett MI 48840

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
Assistant General Counsel IV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
754.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR2259845423244

Amount of Each Receipt this Period
406.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Richard Znidarsic

Mailing Address 14970 Forest Hill Road

City State Zip Code
Grand Ledge MI 48837

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
VP, Information Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1170.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR2259845523244

Amount of Each Receipt this Period
630.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **1288.00**

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

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

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

FOR LINE NUMBER: PAGE 97 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Dan Zolkowski

Mailing Address 1841 Ridgewood Drive

City State Zip Code
East Lansing MI 48823

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

Name of Employer Occupation
Accident Fund Insurance Assistant General Counsel II
Company of Ame

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 754.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2259845623244

Amount of Each Receipt this Period
406.00

P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Anthony Lancione

Mailing Address 2463 Lost Creek Drive

City State Zip Code
Flushing MI 48433

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

Name of Employer Occupation
Accident Fund Insurance Director, Premium Audit
Company of Ame

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 754.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2259846023244

Amount of Each Receipt this Period
406.00

P/R Deduction (\$29.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Christopher Beasley

Mailing Address 405 Harvest Lane

City State Zip Code
Lansing MI 48917

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

Name of Employer Occupation
Accident Fund Insurance Agency Relations Specialist
Company of Ame

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 468.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2259891423244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **1064.00**

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 98 / 386

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Rand Urbin

Mailing Address 28202 Armanda Drive

City State Zip Code
Warren MI 48088-4345

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

Name of Employer Occupation
LifeSecure TBD-Manager & Above

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 234.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2262069623244

Amount of Each Receipt this Period

126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
Linda Aubuchon

Mailing Address 2818 River Meadow Cir

City State Zip Code
Canton MI 48188-2333

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Planning Com

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 234.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2262069823244

Amount of Each Receipt this Period

126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

C.

Full Name (Last, First, Middle Initial)
Stacey Riffle

Mailing Address 11712 Farmington Road

City State Zip Code
Livonia MI 48150-1722

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager-Key Account

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 338.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2262071323244

Amount of Each Receipt this Period

182.00

P/R Deduction (\$13.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

434.00

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 99 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Brad Baty

Mailing Address 4733 Bluebird Court

City State Zip Code
Dexter MI 48130-9372

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2262072223244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

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

Mailing Address 3244 Parker Dr

City State Zip Code
Royal Oak MI 48073-6917

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Systems Analyst Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2262072823244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Corey Krystyniak

Mailing Address 2927 Hartline Dr

City State Zip Code
Rochester Hills MI 48309-4316

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Procurement Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2262073823244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 630.00

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 100 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial) Paula Mutch		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 46344 Turnbuckle Ln		Transaction ID: PR2262074523244
City Macomb	State Zip Code MI 48044-6204	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 252.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager-Key Account	P/R Deduction (\$18.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00	

B.

Full Name (Last, First, Middle Initial) Cassandra Coleman		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 2006 Echo Woods Dr		Transaction ID: PR2262074923244
City Canton	State Zip Code MI 48188-4824	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Business Intelligence Anal Sr	P/R Deduction (\$9.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

C.

Full Name (Last, First, Middle Initial) Sahaya Kurusumuthu		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 5507 Branch St		Transaction ID: PR2262075023244
City Sterling Heights	State Zip Code MI 48310-2249	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 182.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager	P/R Deduction (\$13.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.00	

SUBTOTAL of Receipts This Page (optional)	▶	560.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 101 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Matthew Snell Mailing Address 14507 Ingram St City Livonia State MI Zip Code 48154-3555 FEC ID number of contributing federal political committee. C Name of Employer Blue Cross Blue Shield of Michigan Occupation Business Intelligence Anal Sr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00	Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9 Transaction ID: PR2262075223244 Amount of Each Receipt this Period 126.00 P/R Deduction (\$18.00 Bi-Weekly)
B.	Full Name (Last, First, Middle Initial) Marcin Czabanski Mailing Address 62 Fieldway Ct City Rochester State MI Zip Code 48306-1761 FEC ID number of contributing federal political committee. C Name of Employer LifeSecure Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9 Transaction ID: PR2262083123244 Amount of Each Receipt this Period 140.00 P/R Deduction (\$18.00 Bi-Weekly)
C.	Full Name (Last, First, Middle Initial) Christopher Sobota Mailing Address 234 Roth City Clawson State MI Zip Code 48017-2409 FEC ID number of contributing federal political committee. C Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 219.00	Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9 Transaction ID: PR2263623123244 Amount of Each Receipt this Period 147.00 P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	413.00
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 102 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Mark Polsgrove

Mailing Address 22603 Chestnut Tree Way

City State Zip Code
Novi MI 48375-4362

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Application Developer Adv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2263623523244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$9.00 Bi-W-ekly)

B.

Full Name (Last, First, Middle Initial)
Nancy Cahill

Mailing Address 4092 Autumn Wood Dr

City State Zip Code
Fenton MI 48430-9139

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager-Key Account

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2263624523244
Amount of Each Receipt this Period: 182.00
P/R Deduction (\$13.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Robert Pankau III

Mailing Address 2566 Taylor Dr

City State Zip Code
Troy MI 48083-6907

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Systems Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2263627723244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W-ekly)

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

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

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

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

FOR LINE NUMBER: PAGE 103 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Matthew Haran

Mailing Address 1711 Glengarry Blvd

City State Zip Code
Canton MI 48188

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

Name of Employer
Accident Fund Insurance Company of Ame

Occupation
Director, Corp Communications

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
780.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR2286146523244

Amount of Each Receipt this Period
420.00

P/R Deduction (\$30.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Michael Bryan Johnson

Mailing Address 2561 East Rhead Circle

City State Zip Code
Westland MI 48186-9382

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Analyst - Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR2286330223244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-Weekly)

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

Mailing Address 4405 Muirfield Dr

City State Zip Code
Brighton MI 48116-9784

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

Name of Employer
LifeSecure

Occupation
VP Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
779.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR2289653423244

Amount of Each Receipt this Period
495.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **1041.00**

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 104 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial) Mark Alan Squires		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 27515 Franklin Rd Apt 102		Transaction ID: PR2359652823244
City Southfield	State Zip Code MI 48034-8270	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager-Account	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

B.

Full Name (Last, First, Middle Initial) Renji George		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 42123 Cherry Hill Rd		Transaction ID: PR2359823523244
City Novi	State Zip Code MI 48375-2519	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 252.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Strategy Perf Manager	P/R Deduction (\$13.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 414.00	

C.

Full Name (Last, First, Middle Initial) Timothy Oehlberg		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 479 Clair Hill Dr		Transaction ID: PR2359823723244
City Rochester Hills	State Zip Code MI 48309-2114	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 406.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Director	P/R Deduction (\$29.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.00	

SUBTOTAL of Receipts This Page (optional)	▶	784.00
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 105 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial) Mark Zuccaro		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 13260 Stamford Ave		Transaction ID: PR2359824723244
City Warren	State MI	Zip Code 48089-1351
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Operations Developer Adv	P/R Deduction (\$9.00 Bi-W- eekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

B.

Full Name (Last, First, Middle Initial) Korin Kendra		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 815 S Lafayette		Transaction ID: PR2359826123244
City Dearborn	State MI	Zip Code 48124-1547
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 182.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Technology Consultant	P/R Deduction (\$18.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.00	

C.

Full Name (Last, First, Middle Initial) Linda Oliver		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 28067 New Bedford Dr		Transaction ID: PR2359827823244
City Farmington Hills	State MI	Zip Code 48334-3220
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 406.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Director	P/R Deduction (\$29.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.00	

SUBTOTAL of Receipts This Page (optional)	714.00
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 106 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Kimberly Saint Laurent

Mailing Address 19765 Hayes Ct

City Northville State MI Zip Code 48167-2503

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager Enterprise Security

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 273.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR2359828523244

Amount of Each Receipt this Period 117.00

P/R Deduction (\$13.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Corrie Beaverson

Mailing Address 5683 Caren Dr

City Ypsilanti State MI Zip Code 48197-8348

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation HR Business Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR2359828723244

Amount of Each Receipt this Period 252.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Vickie Hertel

Mailing Address 1464 Blairmoor Ct

City Grosse Pointe Wood State MI Zip Code 48236-1064

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Provider Svcs Project Cons

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR2359830723244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **495.00**

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 107 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Jason Loepp
Mailing Address 1953 Evergreen St SE
City Grand Rapids State MI Zip Code 49506-4115
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Consultant-Sales
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR2359831123244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$9.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Brian Mabie
Mailing Address 42309 Oakland Drive
City Canton State MI Zip Code 48188-5218
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Clinical Pharmacist- Mktg
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 468.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR2359831923244
Amount of Each Receipt this Period 252.00
P/R Deduction (\$18.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
James Gallagher
Mailing Address 36114 Jamison Street
City Livonia State MI Zip Code 48154-5115
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Clinical Pharmacist
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 468.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR2359832523244
Amount of Each Receipt this Period 252.00
P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 630.00
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 108 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Beverly Rosenblatt

Mailing Address 211 Detroit St

City State Zip Code
Trenton MI 48183-1210

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Nurse Case Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2359832623244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-W-weekly)

B. Full Name (Last, First, Middle Initial)
Nina Burnett

Mailing Address 2356 Oak Ridge Drive

City State Zip Code
Troy MI 48098-2444

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Fraud Investigator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2364449023244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-W-weekly)

C. Full Name (Last, First, Middle Initial)
Heather Price

Mailing Address 43524 Scenic Ln

City State Zip Code
Northville MI 48167-8927

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director - Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2364449423244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **658.00**

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 109 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Michael Grenon

Mailing Address 185 Hickory Hills

City Marshall State MI Zip Code 49068

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

Name of Employer: Accident Fund Insurance Company of Ame
Occupation: Manager, SIU

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2364453723244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$13.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Michael Reinholm

Mailing Address 1249 Larkmoor Blvd

City Berkley State MI Zip Code 48072

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

Name of Employer: Accident Fund Insurance Company of Ame
Occupation: Assistant General Counsel II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2364453823244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

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

Mailing Address 22875 Cranbrooke Dr

City Novi State MI Zip Code 48375-4506

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2364459523244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **840.00**

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 110 / 386

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Diane Beagan

Mailing Address 125 E Houstonia Ave

City State Zip Code
Royal Oak MI 48073-4110

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Mgr Primary & Secondary Res

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 338.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2369205823244

Amount of Each Receipt this Period
182.00

P/R Deduction (\$13.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Matthew Karls

Mailing Address 606 Gardenia Ave

City State Zip Code
Royal Oak MI 48067-3697

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Associate - Corp Development

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2369207323244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Bryan D. Jones

Mailing Address 19273 Rolandale St

City State Zip Code
Harper Woods MI 48225-2419

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Sr Sales & Retention Analyst

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2369207923244

Amount of Each Receipt this Period
140.00

P/R Deduction (\$2.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

448.00

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 111 / 386

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Susan Owens

Mailing Address 508 Hartsough St

City State Zip Code
Plymouth MI 48170-1919

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

Name of Employer LifeSecure Occupation TBD-Manager & Above

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2369212423244

Amount of Each Receipt this Period

140.00

P/R Deduction (\$6.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Chad Crosby

Mailing Address 1761 Norton Creek Ct

City State Zip Code
Wixom MI 48393-1423

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2369213323244

Amount of Each Receipt this Period

182.00

P/R Deduction (\$13.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Michael Wood

Mailing Address 14889 Peacock Rd.

City State Zip Code
East Lansing MI 48823

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

Name of Employer Accident Fund Company Occupation Director, TPA Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 754.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR2371491123244

Amount of Each Receipt this Period

406.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

728.00

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 112 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Gary Tygart Jr		Date of Receipt
	Mailing Address 8864 Indigo Ln		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Ypsilanti	MI	48197-1066
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation HR Business Partner	Transaction ID: PR2371537523244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="468.00"/>	
		Amount of Each Receipt this Period <input type="text" value="252.00"/>	
		P/R Deduction (\$18.00 Bi-Weekly)	

B.	Full Name (Last, First, Middle Initial) Mindy Zaborowski		Date of Receipt
	Mailing Address 2365 Hunter Rd		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Brighton	MI	48114-4916
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer LifeSecure		Occupation TBD-Manager & Above	Transaction ID: PR2371541423244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	
		Amount of Each Receipt this Period <input type="text" value="140.00"/>	
		P/R Deduction (\$4.00 Bi-Weekly)	

C.	Full Name (Last, First, Middle Initial) Patricia Ann Hammerle		Date of Receipt
	Mailing Address 3196 Kari Circle		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	DeWitt	MI	48820-7715
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Fraud Investigator	Transaction ID: PR2371567223244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="234.00"/>	
		Amount of Each Receipt this Period <input type="text" value="126.00"/>	
		P/R Deduction (\$13.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="518.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 113 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Paul MacLellan

Mailing Address 7395 Wellington Road

City Brighton State MI Zip Code 48116-8593

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 725.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR2374878323244

Amount of Each Receipt this Period 406.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Paul Mozak

Mailing Address 22552 Havergale St

City Novi State MI Zip Code 48374-3792

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation VP Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR2374879323244

Amount of Each Receipt this Period 700.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Peter Morgan Jr

Mailing Address 28529 Westerleigh Rd

City Farmington Hills State MI Zip Code 48334-2775

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR2374911323244

Amount of Each Receipt this Period 182.00

P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **1288.00**

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 114 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Kevin Keyser

Mailing Address 32567 Haverford Rd

City State Zip Code
Franklin MI 48025-1613

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director - Medicare Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 435.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2379611123244
Amount of Each Receipt this Period: 406.00
P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
David Brown

Mailing Address 551 Plymouth Ave SE

City State Zip Code
Grand Rapids MI 49506-2841

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2393556323244
Amount of Each Receipt this Period: 280.00
P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Philip Berry

Mailing Address 31365 Coachlight Ln

City State Zip Code
Bingham Farms MI 48025-4403

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Sr. Director - Lean

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2402979823244
Amount of Each Receipt this Period: 290.00
P/R Deduction (\$29.00 Bi-Weekly)

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: PAGE 115 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Eileen Kostanecki

Mailing Address 30875 Woodside Dr

City Franklin State MI Zip Code 48025-1462

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Health Policy Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2402987523244
 Amount of Each Receipt this Period: 216.00
 P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Nancy Chiesa

Mailing Address 8702 Bonaventure Drive

City Brighton State MI Zip Code 48116

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

Name of Employer: Accident Fund Insurance Company of Ame
Occupation: Manager, Claims

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2405551623244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Bert Foote

Mailing Address 4335 West Pointe Drive

City Waterford State MI Zip Code 48329

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

Name of Employer: Accident Fund Insurance Company of Ame
Occupation: Regional Mgr, Bus Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2405551723244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 720.00

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 116 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Victoria Kell

Mailing Address 8175 Hunter Road

City Bath State MI Zip Code 48808

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

Name of Employer: Accident Fund Insurance Company of Ame
Occupation: Director, Comp & Benefits

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2405551923244
 Amount of Each Receipt this Period: 280.00
 P/R Deduction (\$25.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Susan Prorak

Mailing Address 1493 W Pratt Road

City DeWitt State MI Zip Code 48820

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

Name of Employer: Accident Fund Insurance Company of Ame
Occupation: Manager, Learn & Talent Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2405552223244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$13.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Scott Sowulewski

Mailing Address 11949 Schavey Rd.

City Dewitt State MI Zip Code 48820

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

Name of Employer: Accident Fund Insurance Company of Ame
Occupation: Director, Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 539.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR2405570023244
 Amount of Each Receipt this Period: 539.00
 P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **1001.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 117 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
LaDawn C Barnette

Mailing Address 5926 N Dowling

City State Zip Code
Westland MI 48185-8349

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824402623244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W-ekly)

B.

Full Name (Last, First, Middle Initial)
Robie J Proctor-Jennings

Mailing Address 14596 Grandville

City State Zip Code
Detroit MI 48223-2231

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Trainer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824404823244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$6.00 Bi-W-ekly)

C.

Full Name (Last, First, Middle Initial)
Leslie E Watson

Mailing Address 6564 Larme Ave

City State Zip Code
Allen Park MI 48101-2436

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Ex Assistant To VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824408823244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W-ekly)

SUBTOTAL of Receipts This Page (optional) ▶ **378.00**

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 118 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Kernita L Smith

Mailing Address 22010 Marlow St

City State Zip Code
Oak Park MI 48237-3516

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Inst Devel - Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824409423244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W-weekly)

B. Full Name (Last, First, Middle Initial)
Julinda K Tarver

Mailing Address 17551 Patton St

City State Zip Code
Detroit MI 48219-2533

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Systems Analyst Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824414023244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W-weekly)

C. Full Name (Last, First, Middle Initial)
Laurie K MacInnis

Mailing Address 34102 Alta Loma Street

City State Zip Code
Farmington MI 48335-4410

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Analyst - Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824414323244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W-weekly)

SUBTOTAL of Receipts This Page (optional) ► **378.00**

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 119 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Sherry M Bilello

Mailing Address 18290 Buckhannon St

City State Zip Code
Roseville MI 48066-4969

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Analyst - Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824420123244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Vanette M Hill

Mailing Address 5708 W Hickory Hollow

City State Zip Code
Wayne MI 48184-2651

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824426723244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Tamika R Gray

Mailing Address 28206 Red Leaf Ln

City State Zip Code
Southfield MI 48076-2921

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Team Leader I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824428823244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **504.00**

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 120 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Kimberly J Sexton		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 5839 Connell Rd		Transaction ID: PR824505123244
	City Emmett	State MI	Zip Code 48022-1303
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Grievance & Appeals Coord	P/R Deduction (\$9.00 Bi-W- eekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00		

B.	Full Name (Last, First, Middle Initial) Darlene R Perry		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 26501 Belanger		Transaction ID: PR824527623244
	City Roseville	State MI	Zip Code 48066-3144
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Analyst	P/R Deduction (\$9.00 Bi-W- eekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00		

C.	Full Name (Last, First, Middle Initial) Kowan W Wise		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 26219 Clarita		Transaction ID: PR824534623244
	City Redford	State MI	Zip Code 48240-1852
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Analyst	P/R Deduction (\$9.00 Bi-W- eekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00		

SUBTOTAL of Receipts This Page (optional)	▶	378.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 121 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

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

Mailing Address 32360 Northampton

City Warren State MI Zip Code 48093-1209

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Underwriter

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824611023244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$9.00 Bi-W- weekly)

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

Mailing Address 2145 Vernier Rd

City Grosse Pointe Wood State MI Zip Code 48236-1548

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Team Leader I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824636923244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$1.00 Bi-W- weekly)

C. Full Name (Last, First, Middle Initial)
Michelle A Castelluzzo

Mailing Address 11522 Pulley Blank

City Pinckney State MI Zip Code 48169-9014

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Analyst-Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824650523244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$9.00 Bi-W- weekly)

SUBTOTAL of Receipts This Page (optional) ► **378.00**

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

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

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

FOR LINE NUMBER: PAGE 122 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Jonathan R Navarra

Mailing Address 20022 N Great Oaks Cir
Court P

City State Zip Code
Clinton Twp MI 48036-2434

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

Name of Employer Blue Cross Blue Shield of Michigan
Occupation Manager-Account

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	9

Transaction ID: PR824653523244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B. Full Name (Last, First, Middle Initial)
Shanta C Williams

Mailing Address 8629 Northlawn

City State Zip Code
Detroit MI 48204-3289

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

Name of Employer Blue Cross Blue Shield of Michigan
Occupation Team Leader I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	9

Transaction ID: PR824668423244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

C. Full Name (Last, First, Middle Initial)
Pam A Trotter

Mailing Address 17215 Algoma NE

City State Zip Code
Cedar Springs MI 49319-9617

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

Name of Employer Blue Cross Blue Shield of Michigan
Occupation Team Leader II Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	9

Transaction ID: PR824673823244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

SUBTOTAL of Receipts This Page (optional) ► **378.00**

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 123 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

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

Mailing Address 9335 Sanilac

City State Zip Code
Detroit MI 48224-1245

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824707023244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Marla D Larkin

Mailing Address 19182 Blackstone

City State Zip Code
Detroit MI 48219-1957

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 316.10

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824755023244
 Amount of Each Receipt this Period: 230.30
 P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Carolyn Lee

Mailing Address 2758 E Lafayette #304

City State Zip Code
Detroit MI 48207-3958

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Special Coordinator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824755523244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **608.30**

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 124 / 386
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Mary A Smith		Date of Receipt
	Mailing Address 10058 King Rd		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Davisburg	MI	48350-1900
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation VP Utilization Mgt & Prog Supt	Transaction ID: PR82475623244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="1170.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="630.00"/>
		P/R Deduction (\$45.00 Bi-Weekly)	

B.	Full Name (Last, First, Middle Initial) Michael D Sharlow		Date of Receipt
	Mailing Address 6060 Bullard		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Fenton	MI	48430-9593
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Audit Team Leader	Transaction ID: PR824756523244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="234.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="126.00"/>
		P/R Deduction (\$10.00 Bi-Weekly)	

C.	Full Name (Last, First, Middle Initial) Patricia A Earl-Cole		Date of Receipt
	Mailing Address 7537 Edward		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Center Line	MI	48015-1010
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Mgr Medicare	Transaction ID: PR824757023244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="338.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="182.00"/>
		P/R Deduction (\$9.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="938.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 125 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Philip C Gibbs

Mailing Address 4903 Danbury

City Troy State MI Zip Code 48085-3787

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Auditor III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824757723244
 Amount of Each Receipt this Period 108.00
 P/R Deduction (\$9.00 Bi-W- weekly)

B.

Full Name (Last, First, Middle Initial)
Steven N Wade

Mailing Address 7081 Maplelawn Dr

City Ypsilanti State MI Zip Code 48197-1764

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Auditor II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824758423244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$9.00 Bi-W- weekly)

C.

Full Name (Last, First, Middle Initial)
Marybeth Okray

Mailing Address 23327 N Colonial Ct

City St Clr Sh State MI Zip Code 48080-2603

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Analyst - Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824758823244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$9.00 Bi-W- weekly)

SUBTOTAL of Receipts This Page (optional) ► 360.00

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 126 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
William T Allen

Mailing Address 602 W Houstonia

City State Zip Code
Royal Oak MI 48073-4082

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director Asst Gen Auditor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824759723244
Amount of Each Receipt this Period: 406.00
P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Victoria M Morrow

Mailing Address 100 Riverfront Dr Apt 310

City State Zip Code
Detroit MI 48226-4535

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Sr Quality Auditor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824759923244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
John A Tudball

Mailing Address 21625 Bayside

City State Zip Code
St Clair Sh MI 48081-2743

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824760023244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **658.00**

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 127 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Twianna S Allen

Mailing Address 26750 Pebbleview Apt 206

City Southfield State MI Zip Code 48034-1587

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Audit Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824763223244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$9.00 Bi-W-ekly)

B. Full Name (Last, First, Middle Initial)
Perry J Danver

Mailing Address 19749 Fitzgerald

City Livonia State MI Zip Code 48152-4038

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Application Developer Adv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824765823244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$4.00 Bi-W-ekly)

C. Full Name (Last, First, Middle Initial)
Karen K Bristle

Mailing Address 1350 S Cummings Rd

City Davison State MI Zip Code 48423-8122

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Sr Systems Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824766523244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$9.00 Bi-W-ekly)

SUBTOTAL of Receipts This Page (optional) ▶ **378.00**

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 128 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Sandra-Lee G Powers

Mailing Address 28890 Lorikay

City Farmington Hills State MI Zip Code 48334-2836

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Team Lead Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824766923244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Diane M Stanton

Mailing Address 20147 Myron

City Livonia State MI Zip Code 48152-1255

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Application Developer Adv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824769023244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Warren S Sylvertooth

Mailing Address 530 S Piper Ct

City Detroit State MI Zip Code 48215-3295

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824772423244
 Amount of Each Receipt this Period 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **658.00**

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 129 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Kimberley C Scicluna

Mailing Address 23124 Liberty

City State Zip Code
St Clr Sh MI 48080-1503

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Proj Mgr PPI

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR824772523244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Reina H Navarra

Mailing Address 43529 Bayfield

City State Zip Code
Clntn Twp MI 48038-1303

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR824772723244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Leola M Burrell

Mailing Address 29185 Oakwood

City State Zip Code
Inkster MI 48141-1667

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
338.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR824772923244

Amount of Each Receipt this Period
182.00

P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **686.00**

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 130 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Diane M Logsdon
Mailing Address 8485 Westminster
City Warren State MI Zip Code 48089-3046
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Grievance & Appeals Coord
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824773723244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$9.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Sherry K Nesler
Mailing Address PO Box 871159
City Canton State MI Zip Code 48187-6159
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Grievance & App Team Lead Sr
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824774023244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$9.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Concettina Patsalis
Mailing Address 15974 Jupiter Hills Dr
City Northville State MI Zip Code 48168-8628
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824774223244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 378.00
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 131 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Helen Stojic</p> <p>Mailing Address 28 Elm Park Blvd</p> <p>City State Zip Code Plsnt Rdg MI 48069-1105</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 754.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9</p> <p>Transaction ID: PR824776123244</p> <p>Amount of Each Receipt this Period 406.00</p> <p>P/R Deduction (\$29.00 Bi-Weekly)</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) Tammy J Conway</p> <p>Mailing Address 13401 Oak Park Blvd</p> <p>City State Zip Code Oak Park MI 48237-3632</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Team Leader II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 234.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9</p> <p>Transaction ID: PR824778423244</p> <p>Amount of Each Receipt this Period 126.00</p> <p>P/R Deduction (\$9.00 Bi-W-ekly)</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) John W Groth</p> <p>Mailing Address 2374 Cheaspeake Court</p> <p>City State Zip Code Troy MI 48098-2478</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 213.20</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9</p> <p>Transaction ID: PR824778823244</p> <p>Amount of Each Receipt this Period 114.80</p> <p>P/R Deduction (\$8.25 Bi-W-ekly)</p>
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SUBTOTAL of Receipts This Page (optional)	646.80
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 132 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) DeAndre A Lipscomb		Date of Receipt
	Mailing Address 29064 Raleigh Rd		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Farmington Hills	MI	48336-1453
	FEC ID number of contributing federal political committee. C		Transaction ID: PR824778923244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="754.00"/>	<input type="text" value="406.00"/>
			P/R Deduction (\$29.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) James E Negro		Date of Receipt
	Mailing Address 5270 Inverrary Ln		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Commrce Twp	MI	48382-1048
	FEC ID number of contributing federal political committee. C		Transaction ID: PR824782023244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Director Sales Infrm	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="858.00"/>	<input type="text" value="462.00"/>
			P/R Deduction (\$35.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Deanne E Seifert		Date of Receipt
	Mailing Address 5517 Kingfield Dr		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	West Bloomfield	MI	48322-1459
	FEC ID number of contributing federal political committee. C		Transaction ID: PR824782323244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager Sales Infrm	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="468.00"/>	<input type="text" value="252.00"/>
			P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1120.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Kevin Kitze		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 47793 Royal Pointe Dr		Transaction ID: PR824782623244		
	City Canton	State MI	Zip Code 48187-5464	Amount of Each Receipt this Period 252.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$9.00 Bi-Weekly)		
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Health Care Analyst	Aggregate Year-to-Date 468.00		

B.	Full Name (Last, First, Middle Initial) Michelle M Storz		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 411 Manor Street		Transaction ID: PR824782823244		
	City Grosse Pointe Farm	State MI	Zip Code 48236-3210	Amount of Each Receipt this Period 252.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$18.00 Bi-Weekly)		
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager	Aggregate Year-to-Date 468.00		

C.	Full Name (Last, First, Middle Initial) Randolphe J Roulier		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 11032 Melrose		Transaction ID: PR824783023244		
	City Livonia	State MI	Zip Code 48150-2824	Amount of Each Receipt this Period 406.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$18.00 Bi-Weekly)		
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Director - Senior Marketing	Aggregate Year-to-Date 754.00		

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 134 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Scott J Hamerink	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 1315 Kingspath Dr	Transaction ID: PR824783123244
	City State Zip Code Rochester Hills MI 48306-3728	Amount of Each Receipt this Period 252.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Manager Admin Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 468.00	P/R Deduction (\$18.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Joseph G Lieblang	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 22337 Tenny	Transaction ID: PR824783323244
	City State Zip Code Dearborn MI 48124-2744	Amount of Each Receipt this Period 182.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00	P/R Deduction (\$18.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Kristie L Hand	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 26763 Park Ln	Transaction ID: PR824783523244
	City State Zip Code Woodhaven MI 48183-4383	Amount of Each Receipt this Period 182.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00	P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	▶	616.00
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 135 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Mary E Mohn

Mailing Address 256 Felice St

City State Zip Code
Wyandotte MI 48192-3416

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

Name of Employer Blue Cross Blue Shield of Michigan
Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824784023244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$13.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Richard T Theisen

Mailing Address 23250 Cheltenham Ln

City State Zip Code
Dearbn Hts MI 48127-2365

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

Name of Employer Blue Cross Blue Shield of Michigan
Occupation Attorney Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824785123244

Amount of Each Receipt this Period
406.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Bryant D Greene

Mailing Address 4842 Yorkshire Rd

City State Zip Code
Detroit MI 48224-2332

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

Name of Employer Blue Cross Blue Shield of Michigan
Occupation Attorney Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824785223244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-Weekly)

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 136 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Lisa M Varnier	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 4139 Wakefield	Transaction ID: PR824786023244
	City State Zip Code Berkley MI 48072-3463	Amount of Each Receipt this Period 406.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Attorney Senior Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 754.00	P/R Deduction (\$29.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Timothy P Cook	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 4148 Stamper Way	Transaction ID: PR824786923244
	City State Zip Code Howell MI 48855-3977	Amount of Each Receipt this Period 252.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 468.00	P/R Deduction (\$18.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Melanie M Brown	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 8701 E. Outer Drive	Transaction ID: PR824787023244
	City State Zip Code Detroit MI 48213-4003	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Community Affairs Rep Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 234.00	P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	784.00
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 137 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Michele Pomante

Mailing Address 24817 St Paul

City State Zip Code
Harrsn Twp MI 48045-1934

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Strategy Perf Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824787223244
 Amount of Each Receipt this Period: 140.00
 P/R Deduction (\$9.00 Bi-W- weekly)

B. Full Name (Last, First, Middle Initial)
Amy E Modlin

Mailing Address 2312 Fort William Dr

City State Zip Code
Olney MD 20832-1665

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824787423244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi- Weekly)

C. Full Name (Last, First, Middle Initial)
Mark A Cook

Mailing Address 1121 Lone Oak Dr

City State Zip Code
Mason MI 48854-8714

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: VP Governmental Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824787523244
 Amount of Each Receipt this Period: 630.00
 P/R Deduction (\$45.00 Bi- Weekly)

SUBTOTAL of Receipts This Page (optional) ► **1176.00**

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 138 / 386 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Kelli R Rosenbaum</p> <p>Mailing Address 3840 Lone Pine Dr. Apt. 2</p> <p>City Holt State MI Zip Code 48842-8766</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Analyst - Senior</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 234.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2009</p> <p>Transaction ID: PR824787623244</p> <p>Amount of Each Receipt this Period 126.00</p> <p>P/R Deduction (\$9.00 Bi-W- eekly)</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) Laura D Walker</p> <p>Mailing Address 26192 Summerdale Dr Bldg 12 Unit 92</p> <p>City Southfld State MI Zip Code 48033-6135</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 754.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2009</p> <p>Transaction ID: PR824788223244</p> <p>Amount of Each Receipt this Period 406.00</p> <p>P/R Deduction (\$29.00 Bi- Weekly)</p>
---	--

<p>C. Full Name (Last, First, Middle Initial) Shawn S Burch</p> <p>Mailing Address 1430 Oakland Court</p> <p>City Dearborn Heights State MI Zip Code 48125-1041</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Manager Admin</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 450.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2009</p> <p>Transaction ID: PR824788723244</p> <p>Amount of Each Receipt this Period 252.00</p> <p>P/R Deduction (\$13.00 Bi- Weekly)</p>
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<p>SUBTOTAL of Receipts This Page (optional)</p>	784.00
<p>TOTAL This Period (last page this line number only)</p>	

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

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

FOR LINE NUMBER: PAGE 139 / 386

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Marshall R Weipert

Mailing Address 2813 Blue Heron

City State Zip Code
Wixom MI 48393-4552

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Sr Sales Information Analyst

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824789023244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
Kristy A Bainbridge

Mailing Address 36087 Little Mack

City State Zip Code
Clinton Twp MI 48035-4424

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Sr Executive Asst to the CEO

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824789223244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

C.

Full Name (Last, First, Middle Initial)
Paul G Litchfield

Mailing Address 5825 Rosebrook Drive

City State Zip Code
Troy MI 48085-3880

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Ld Financial Analyst

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824789423244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

SUBTOTAL of Receipts This Page (optional)

378.00

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 140 / 386

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Laurine Symula Parmely

Mailing Address 5772 Martell Drive

City State Zip Code
Troy MI 48085-3160

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Attorney Senior

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 754.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824791923244

Amount of Each Receipt this Period
406.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Jeffrey P Rumley

Mailing Address 1750 Vernier
Apt 10

City State Zip Code
Grosse Pointe Wood MI 48236-1572

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan VP and General Counsel

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1170.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824792323244

Amount of Each Receipt this Period
630.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Teresa Mikan

Mailing Address 1231 White Oaks

City State Zip Code
Okemos MI 48864-3067

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Attorney Senior

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 754.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824792623244

Amount of Each Receipt this Period
406.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1442.00

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 141 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Frank Westley Jackson

Mailing Address 18664 Birchcrest

City State Zip Code
Detroit MI 48221-2225

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Attorney Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 846.82

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824792823244
Amount of Each Receipt this Period: 455.98
P/R Deduction (\$32.59 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Michael T Zajac

Mailing Address 53965 Sutherland Ct

City State Zip Code
Shelby Twp MI 48316-1231

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Attorney Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 377.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824793523244
Amount of Each Receipt this Period: 29.00
P/R Deduction (\$29.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Joseph W Murray

Mailing Address 22325 Yale St

City State Zip Code
St Clair Shores MI 48081-2039

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Attorney Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824793723244
Amount of Each Receipt this Period: 406.00
P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **890.98**

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 142 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Bart M Feinbaum	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 30351 Southampton Ln	Transaction ID: PR824794023244
	City State Zip Code Farmington Hills MI 48331-1727	Amount of Each Receipt this Period 406.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Attorney Senior Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 754.00	P/R Deduction (\$29.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Robert A Phillips	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 21985 Ember Court	Transaction ID: PR824794123244
	City State Zip Code Grosse Ile MI 48138-0000	Amount of Each Receipt this Period 406.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 754.00	P/R Deduction (\$29.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Kevin M Stanko	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 2233 Camelot Drive	Transaction ID: PR824794723244
	City State Zip Code Troy MI 48083-2556	Amount of Each Receipt this Period 406.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Attorney Senior Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 754.00	P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	1218.00
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 143 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Leo A Nouhan		Date of Receipt
	Mailing Address 1326 Yorkshire		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Grosse Pointe Park	MI	48230-1108
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Attorney Senior	Transaction ID: PR824794823244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="754.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="406.00"/>
		P/R Deduction (\$29.00 Bi-Weekly)	

B.	Full Name (Last, First, Middle Initial) Matthew A Case		Date of Receipt
	Mailing Address 9370 Big Hand Rd		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Columbus	MI	48063-3013
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Attorney Senior	Transaction ID: PR824794923244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="754.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="406.00"/>
		P/R Deduction (\$29.00 Bi-Weekly)	

C.	Full Name (Last, First, Middle Initial) Sue E Jenkins		Date of Receipt
	Mailing Address 2391 Forest Oak Trl		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Williamston	MI	48895-9032
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Attorney Senior	Transaction ID: PR824795323244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="754.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="406.00"/>
		P/R Deduction (\$29.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1218.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 144 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Scott A Whipple		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 9		
	Mailing Address 7427 Fenton		Transaction ID: PR824795723244		
	City Dearborn Hts	State MI	Zip Code 48127-1751	Amount of Each Receipt this Period 348.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$29.00 Bi-Weekly)		
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 696.00			

B.	Full Name (Last, First, Middle Initial) Thomas C Clickner		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 9		
	Mailing Address 11400 Ransom Hwy		Transaction ID: PR824796423244		
	City Dimondale	State MI	Zip Code 48821-8751	Amount of Each Receipt this Period 70.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$2.00 Bi-Weekly)		
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager Fraud Investigation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00			

C.	Full Name (Last, First, Middle Initial) Anna Lepore		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 9		
	Mailing Address 4436 Eleanor		Transaction ID: PR824796523244		
	City Troy	State MI	Zip Code 48085-5034	Amount of Each Receipt this Period 126.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$9.00 Bi-Weekly)		
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Analyst			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 234.00			

SUBTOTAL of Receipts This Page (optional)	▶	544.00
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 145 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Gregory W Anderson

Mailing Address 37161 Chesapeake

City State Zip Code
Farmington Hills MI 48335-1142

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: VP Corp & Financial Invest

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824797423244
 Amount of Each Receipt this Period: 630.00
 P/R Deduction (\$45.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Patrick T Wallis

Mailing Address 5512 Crane Creek Ct

City State Zip Code
Hamburg Twp MI 48189-8159

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager Fraud Investigation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824797723244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$10.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Douglas R Cedras

Mailing Address 2616 McClintock

City State Zip Code
Bloomfield MI 48302-0756

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824798123244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **1218.00**

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 146 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Constance L Chandler-Dansby

Mailing Address 281 Candace Court

City Troy State MI Zip Code 48098-7100

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Systems Analyst Adv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR824800923244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$9.00 Bi-W- weekly)

B.

Full Name (Last, First, Middle Initial)
Diane S Cesarz

Mailing Address 18525 Shadyside St

City Livonia State MI Zip Code 48152-3245

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager Admin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR824801423244

Amount of Each Receipt this Period 252.00

P/R Deduction (\$18.00 Bi- Weekly)

C.

Full Name (Last, First, Middle Initial)
Edward J Maul

Mailing Address 630 S Melborn St

City Dearborn State MI Zip Code 48124-1622

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Health Care Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR824801523244

Amount of Each Receipt this Period 182.00

P/R Deduction (\$13.00 Bi- Weekly)

SUBTOTAL of Receipts This Page (optional) ► **560.00**

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

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

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

FOR LINE NUMBER: PAGE 147 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Barbara A Brown-Cadovich
Mailing Address 356 Falling Brook Dr
City Troy State MI Zip Code 48098-4646
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Health Care Manager
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 468.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824801623244
Amount of Each Receipt this Period 252.00
P/R Deduction (\$18.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Donna A Colosimo
Mailing Address 38074 Hixford Place
City Westland State MI Zip Code 48185-3392
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Sr Account Rep
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824801923244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$9.00 Bi-W-ekly)

C. Full Name (Last, First, Middle Initial)
David D Neighbour
Mailing Address 21439 Chestnut Ln
City Farmington State MI Zip Code 48336-4507
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Adv Application Developer
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824802723244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$9.00 Bi-W-ekly)

SUBTOTAL of Receipts This Page (optional) ▶ 504.00
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 148 / 386

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Rollyn R Llewellyn II

Mailing Address 5897 Donaldson Dr

City State Zip Code
Troy MI 48085-3109

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Technology Consultant

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 468.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824803523244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Dawn J Geisert

Mailing Address 55907 Nicholas Dr

City State Zip Code
Shelby Twp MI 48316-5817

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Attorney

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 468.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824804223244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Kimberly A Winnik

Mailing Address 18162 Cascade Dr

City State Zip Code
Northville MI 48167-3286

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Sr Dir Corp Compliance

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 435.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824804723244

Amount of Each Receipt this Period
87.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

591.00

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 149 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Frank J Slisinger
Mailing Address 34518 Morningdale Dr
City State Zip Code
Strlg Hts MI 48312-5744
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Director
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 754.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824805123244
Amount of Each Receipt this Period 406.00
P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Ernest S Wronkowicz
Mailing Address 39136 Chantilly Dr
City State Zip Code
Strlg Hts MI 48313-5108
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Dir Vendor Management
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824805223244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$9.00 Bi-W-ekly)

C. Full Name (Last, First, Middle Initial)
Jill Money
Mailing Address 9545 Harmon Lane
City State Zip Code
South Lyon MI 48178-8335
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Team Lead Sr
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824805923244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$9.00 Bi-W-ekly)

SUBTOTAL of Receipts This Page (optional) ▶ **658.00**
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 150 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Sheri B Patton

Mailing Address 5583 Firwood

City State Zip Code
Troy MI 48098-2508

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR824806223244

Amount of Each Receipt this Period
140.00

P/R Deduction (\$10.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Gary G Montmorency

Mailing Address 32363 Baintree

City State Zip Code
Farmington Hills MI 48334-3517

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Manager IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
338.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR824807123244

Amount of Each Receipt this Period
182.00

P/R Deduction (\$13.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Julie D Anderson

Mailing Address 954 W Marshall

City State Zip Code
Ferndale MI 48220-1681

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR824807423244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **574.00**

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 151 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Michael B Guette

Mailing Address 9529 Oakley Rd

City State Zip Code
Saint Charles MI 48655-9527

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Tech Solutions Architect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824808023244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$6.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Diane T Cantara

Mailing Address 2710 Seymour Lk Rd

City State Zip Code
Oxford MI 48371-4238

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824808223244
Amount of Each Receipt this Period: 182.00
P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Richard J Werther

Mailing Address 45171 Courtview Trl

City State Zip Code
Novi MI 48375-3861

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

Name of Employer: Dentemax
Occupation: VP Finance & Administration

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824808423244
Amount of Each Receipt this Period: 45.00
P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **353.00**

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 152 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Dennis M Winkler

Mailing Address 2888 Kilburn Ct

City State Zip Code
Rchstr Hls MI 48306-3025

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director Technical Prog Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824809023244
Amount of Each Receipt this Period: 406.00
P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Dennis A Nunnold

Mailing Address 5500 Huntsman Dr

City State Zip Code
White Lk MI 48383-1680

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Technology Architect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824809423244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Alan J Byrnes

Mailing Address 15063 Lakewood Dr

City State Zip Code
Plymouth MI 48170-2679

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824809623244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 910.00

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

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

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

FOR LINE NUMBER: PAGE 153 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Pierre A McDougall

Mailing Address 19473 Tanglewood Circle

City State Zip Code
Clinton Township MI 48038-4961

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824810523244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Clara J Reay

Mailing Address 3325 Lessia Dr

City State Zip Code
Clio MI 48420-1918

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824811023244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$2.00 Bi-Weekly)

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

Mailing Address 2914 Bamlet Rd

City State Zip Code
Royal Oak MI 48073-2979

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824811123244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **994.00**

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 154 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial) David E Wendt		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 30580 South Hill Rd		Transaction ID: PR824811623244
City New Hudson	State MI	Zip Code 48165-9710
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Team Lead Sr	P/R Deduction (\$9.00 Bi-W- eekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

B.

Full Name (Last, First, Middle Initial) Robin G Mynhier		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 3257 Outback Trl		Transaction ID: PR824811923244
City Pinckney	State MI	Zip Code 48169-8876
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 252.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Technology Consultant	P/R Deduction (\$18.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00	

C.

Full Name (Last, First, Middle Initial) Uttiyo (Ty) Sarkar		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 3010 Parkland Dr		Transaction ID: PR824812123244
City West Bloomfield	State MI	Zip Code 48322-1822
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Portfolio Manager	P/R Deduction (\$9.00 Bi-W- eekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

SUBTOTAL of Receipts This Page (optional)	504.00
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 155 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Michelle Billingsley

Mailing Address 12900 East Outer Drive

City State Zip Code
Detroit MI 48224-2731

FEC ID number of contributing federal political committee. C

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 725.00

Date of Receipt M M / D D / Y Y Y Y
12 / 31 / 2009

Transaction ID: PR824812223244

Amount of Each Receipt this Period 406.00

P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Tonya L Hadnot

Mailing Address 10331 Dartmouth

City State Zip Code
Oak Park MI 48237-1705

FEC ID number of contributing federal political committee. C

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt M M / D D / Y Y Y Y
12 / 31 / 2009

Transaction ID: PR824812623244

Amount of Each Receipt this Period 406.00

P/R Deduction (\$29.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Patricia M Roach

Mailing Address 286 Longford

City State Zip Code
Rchstr Hls MI 48309-2032

FEC ID number of contributing federal political committee. C

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Team Lead Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt M M / D D / Y Y Y Y
12 / 31 / 2009

Transaction ID: PR824812923244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 938.00

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 156 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Jeffrey D Denhard

Mailing Address 5644 Cliffside Drive

City State Zip Code
Troy MI 48085-3845

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Program Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824813623244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Lorna M Koscielny

Mailing Address 35560 Ann Arbor Trail

City State Zip Code
Livonia MI 48150-3596

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Program Manager Contract Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
338.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824814023244

Amount of Each Receipt this Period
182.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Douglas E Darland

Mailing Address 529 Burtman

City State Zip Code
Troy MI 48083-1042

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
754.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824814423244

Amount of Each Receipt this Period
406.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **840.00**

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 157 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Philip D Bone		Date of Receipt
	Mailing Address 1497 Heights Rd		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Lk Orion	MI	48362-2212
	FEC ID number of contributing federal political committee. C		Transaction ID: PR824814823244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager Sales Infrm	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 468.00	<input type="text" value="252.00"/>
			P/R Deduction (\$18.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Karen A Gentilcore		Date of Receipt
	Mailing Address 37384 Brett Dr		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	New Bltmr	MI	48047-5515
	FEC ID number of contributing federal political committee. C		Transaction ID: PR824814923244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Systems Analyst Adv	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 234.00	<input type="text" value="126.00"/>
			P/R Deduction (\$9.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Bonnie K Harrington		Date of Receipt
	Mailing Address 3468 Shaddick		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Waterford	MI	48328-2560
	FEC ID number of contributing federal political committee. C		Transaction ID: PR824815223244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 468.00	<input type="text" value="252.00"/>
			P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="630.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 158 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Diane M Tudball
 Mailing Address 21625 Bayside
 City State Zip Code
 St Clr Sh MI 48081-2743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Cross Blue Shield of Michigan
 Occupation Systems Analyst Sr
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00
 Date of Receipt 12 / 31 / 2009
Transaction ID: PR824815323244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$9.00 Bi-W- weekly)

B. Full Name (Last, First, Middle Initial)
Robert J Galac
 Mailing Address 693 Bolinger
 City State Zip Code
 Rchstr Hls MI 48307-2820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Cross Blue Shield of Michigan
 Occupation Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 754.00
 Date of Receipt 12 / 31 / 2009
Transaction ID: PR824815423244
 Amount of Each Receipt this Period 406.00
 P/R Deduction (\$29.00 Bi- Weekly)

C. Full Name (Last, First, Middle Initial)
Kathleen M Schummer
 Mailing Address 1540 Oxford
 City State Zip Code
 Grs Pt Wds MI 48236-1844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Cross Blue Shield of Michigan
 Occupation Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 754.00
 Date of Receipt 12 / 31 / 2009
Transaction ID: PR824817123244
 Amount of Each Receipt this Period 406.00
 P/R Deduction (\$29.00 Bi- Weekly)

SUBTOTAL of Receipts This Page (optional) ► 938.00
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 159 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Barbara G Derian

Mailing Address 2403 Sanders Place

City State Zip Code
Bloomfield MI 48302-0460

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Sr. Director Bus Config

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824817223244
Amount of Each Receipt this Period: 406.00
P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Leslie A Selden

Mailing Address 23201 Canfield Ave

City State Zip Code
Farmington Hills MI 48336-3771

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Application Developer Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824817723244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Duwayne C Mills

Mailing Address 1612 Bloomfield Place Dr. #119

City State Zip Code
Bloomfield Hills MI 48302-0000

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824817923244
Amount of Each Receipt this Period: 182.00
P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **714.00**

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 160 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Patrece M Jackson

Mailing Address 7701 West Parkway

City State Zip Code
Detroit MI 48239-1069

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824818023244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
John I Aro

Mailing Address 1311 Harvard

City State Zip Code
Grs Pt Pk MI 48230-1133

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Sr Systems Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824818723244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Nathan P Foco

Mailing Address 1927 Fern St

City State Zip Code
Royal Oak MI 48073-4185

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824819223244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **434.00**

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 161 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Charlene S Rayburn		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 44739 North Hills Dr Apt 98		Transaction ID: PR824819623244
	City Northville	State MI	Zip Code 48167-6114
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 252.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Team Leader II	P/R Deduction (\$6.00 Bi-W- eekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00		

B.	Full Name (Last, First, Middle Initial) Rozanne M Fleszar		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 23459 Danberry		Transaction ID: PR824819823244
	City Novi	State MI	Zip Code 48375-3707
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 406.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager	P/R Deduction (\$18.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.00		

C.	Full Name (Last, First, Middle Initial) Kathleen M Dolan		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 1617 Fleetwood		Transaction ID: PR824820423244
	City Troy	State MI	Zip Code 48098-2512
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 252.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager - Project	P/R Deduction (\$18.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00		

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

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

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

FOR LINE NUMBER: PAGE 162 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Donna L Waller

Mailing Address 894 Avon Court

City State Zip Code
Grs Pt Wds MI 48236-1239

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824820523244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Lynnette P Powell

Mailing Address 6708 High Ridge Rd

City State Zip Code
W Bloomfield MI 48324-3221

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Consultant Product Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824820823244
 Amount of Each Receipt this Period: 140.00
 P/R Deduction (\$10.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Brenda L Storie

Mailing Address 30060 Lamplighter

City State Zip Code
New Hudsn MI 48165-9679

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824821223244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 952.00

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 163 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Mary J Tully

Mailing Address 29316 Fairfield

City Warren State MI Zip Code 48088-3685

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation ECV Business Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR824821323244

Amount of Each Receipt this Period 182.00

P/R Deduction (\$6.00 Bi-W-weekly)

B.

Full Name (Last, First, Middle Initial)
Christine M Kauffmann

Mailing Address 1738 Leroy St

City Ferndale State MI Zip Code 48220-3145

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager - Project

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR824821723244

Amount of Each Receipt this Period 182.00

P/R Deduction (\$9.00 Bi-W-weekly)

C.

Full Name (Last, First, Middle Initial)
Jacqueline R Barden

Mailing Address 29629 Monterey Circle

City Farmington Hills State MI Zip Code 48336-1304

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR824823723244

Amount of Each Receipt this Period 252.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **616.00**

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 164 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Charlotte J Stevens-Ankiel	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 13836 Fordham	Transaction ID: PR824826023244
	City State Zip Code Detroit MI 48205-2326	Amount of Each Receipt this Period 18.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$18.00 Bi-Weekly)
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00	

B.	Full Name (Last, First, Middle Initial) Jeffrey M Witzburg	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 9650 Winterset Circle	Transaction ID: PR824826423244
	City State Zip Code Plymouth MI 48170-3273	Amount of Each Receipt this Period 252.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$18.00 Bi-Weekly)
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Business Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 468.00	

C.	Full Name (Last, First, Middle Initial) Joan M Budden	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 3820 Woodlake Dr	Transaction ID: PR824827423244
	City State Zip Code Blmfld Hls MI 48304-3074	Amount of Each Receipt this Period 135.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$45.00 Bi-Weekly)
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: VP Individual Business Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 675.00	

SUBTOTAL of Receipts This Page (optional)	405.00
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 165 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Carol L Purdy

Mailing Address 36989 Fox Glen

City Farmington Hills State MI Zip Code 48331-1803

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Strategy Perf Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824827923244
 Amount of Each Receipt this Period 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Jeffrey J Reeve

Mailing Address 567 St Louis St

City Ferndale State MI Zip Code 48220-2436

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Marketing Research Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824828423244
 Amount of Each Receipt this Period 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Donna D Stache

Mailing Address 3640 Worthington Ct

City Rochester Hills State MI Zip Code 48309-1180

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824828923244
 Amount of Each Receipt this Period 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 756.00

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 166 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Patrice M Eller

Mailing Address 5153 Pecan Drive

City Ypsilanti State MI Zip Code 48197-6819

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 493.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824829323244
 Amount of Each Receipt this Period 145.00
 P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Frank A Maslowski

Mailing Address 5160 Mead

City Dearborn State MI Zip Code 48126-3018

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824829823244
 Amount of Each Receipt this Period 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Gerald W Noxon

Mailing Address 22745 Huron River Dr

City New Bostn State MI Zip Code 48164-9439

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824830023244
 Amount of Each Receipt this Period 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **803.00**

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 167 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Gloria E Nastas
Mailing Address 1606 Woodgate
City Troy State MI Zip Code 48083-5537
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Senior Health Care Analyst
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824830423244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$9.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Ara L Rafaelian
Mailing Address 245 Crest
City Ann Arbor State MI Zip Code 48103-4315
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Health Care Manager
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 468.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824831323244
Amount of Each Receipt this Period 252.00
P/R Deduction (\$18.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Huda Fadel
Mailing Address 2340 St Francis Drive
City Ann Arbor State MI Zip Code 48104-4807
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Consultant COA Activities
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824832123244
Amount of Each Receipt this Period 182.00
P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 560.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 168 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Janet E Shermer
Mailing Address 3387 Oakwood St
City Ann Arbor State MI Zip Code 48104-5269
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Business Analyst Sr
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR8248323244
Amount of Each Receipt this Period 182.00
P/R Deduction (\$13.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Robyn A Rontal
Mailing Address 2397 Rockport Ct
City Ann Arbor State MI Zip Code 48103-8911
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Director
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 754.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824833023244
Amount of Each Receipt this Period 406.00
P/R Deduction (\$29.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Michael A Mattei
Mailing Address 6088 Glen Eagles
City W Blmfld State MI Zip Code 48323-2212
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 468.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824841923244
Amount of Each Receipt this Period 252.00
P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 840.00
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 169 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Lawrence S Plotnisky

Mailing Address 27931 Ursuline

City State Zip Code
St Clr Sh MI 48081-3646

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Sr Account Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824843923244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-W- weekly)

B. Full Name (Last, First, Middle Initial)
Thomas A Marquard

Mailing Address 24516 Rockford

City State Zip Code
Dearborn MI 48124-1333

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824845223244
 Amount of Each Receipt this Period: 234.00
 P/R Deduction (\$18.00 Bi- Weekly)

C. Full Name (Last, First, Middle Initial)
Daniel M Blazo

Mailing Address 6980 Crestwood

City State Zip Code
Dearbn Hts MI 48127-1998

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824845323244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-W- weekly)

SUBTOTAL of Receipts This Page (optional) ► 486.00

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 170 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Judy-Ann M McChester

Mailing Address 17120 Coral Gables

City State Zip Code
Southfld MI 48076-4701

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824845723244
Amount of Each Receipt this Period: 182.00
P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Linda L Garrison

Mailing Address 5536 Victory Circle

City State Zip Code
Sterling Hts MI 48310-7700

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: VP Ford & Chrysler Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824846023244
Amount of Each Receipt this Period: 630.00
P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Desiree S Carroll

Mailing Address 1045 Baldwin St

City State Zip Code
Detroit MI 48214-2430

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824846223244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$6.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 938.00

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 171 / 386
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Sharon L Moore	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 1845 Maple Park Dr East	Transaction ID: PR824847423244
	City State Zip Code Canton MI 48188-4827	Amount of Each Receipt this Period 182.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.00	P/R Deduction (\$13.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Cheryl D Holloway	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 36748 Tanglewood Lane	Transaction ID: PR824849623244
	City State Zip Code Farmington Hills MI 48331-0000	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Sr Account Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	P/R Deduction (\$9.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Mark K Hayes	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 1316 W. Cross St.	Transaction ID: PR824850123244
	City State Zip Code Ypsilanti MI 48197-2109	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	P/R Deduction (\$6.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	434.00
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 172 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Vickianne Harbowy

Mailing Address 16092 Swathmore Ct North

City Livonia State MI Zip Code 48154-1005

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824850223244
 Amount of Each Receipt this Period 406.00
 P/R Deduction (\$9.00 Bi-W- weekly)

B. Full Name (Last, First, Middle Initial)
Michael F Gurney

Mailing Address 36648 Almond Circle

City Frmgtn Hls State MI Zip Code 48335-3812

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824850423244
 Amount of Each Receipt this Period 406.00
 P/R Deduction (\$29.00 Bi- Weekly)

C. Full Name (Last, First, Middle Initial)
Naomi S Howard

Mailing Address 18360 New Hampshire Drive

City Southfield State MI Zip Code 48075-8104

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Sr Account Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR824850723244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$9.00 Bi-W- weekly)

SUBTOTAL of Receipts This Page (optional) ► 938.00

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 173 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Emma M Bissonnette

Mailing Address 32417 Desmond

City Warren State MI Zip Code 48093-1154

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824851723244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$13.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Elizabeth R Lepouttre

Mailing Address 36552 Catalpa Ln

City New Baltimore State MI Zip Code 48047-5575

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824852323244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Kimberly J McWilliams

Mailing Address 33875 Quaker Valley Road

City Farmington Hills State MI Zip Code 48331-3661

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824852623244
 Amount of Each Receipt this Period: 140.00
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 518.00

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 174 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Susan J Gillette	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 460 Orange	Transaction ID: PR824853323244
	City State Zip Code Wyandotte MI 48192-6226	Amount of Each Receipt this Period 252.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 306.00	P/R Deduction (\$18.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Cheryl L Nowak	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 13252 Exeter	Transaction ID: PR824853423244
	City State Zip Code Carleton MI 48117-9721	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Systems Analyst Adv Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 234.00	P/R Deduction (\$9.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) John F Cartier	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 1117 Fernwood Rd	Transaction ID: PR824855323244
	City State Zip Code Royal Oak MI 48067-1167	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Analyst - Senior Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 234.00	P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	504.00
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 175 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Luzine Brister

Mailing Address 17145 Strathmoor

City State Zip Code
Detroit MI 48235-3919

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824855923244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Brian D Armstrong

Mailing Address 1363 North Creek Dr

City State Zip Code
Wixom MI 48393-1638

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: VP Group Sales Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824856023244
 Amount of Each Receipt this Period: 630.00
 P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Rick V Morrone

Mailing Address 3751 Parker

City State Zip Code
Dearborn MI 48124-3557

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: VP GM/Delphi Control Plan

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824857523244
 Amount of Each Receipt this Period: 630.00
 P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **1666.00**

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 176 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Lori A Shannon	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 2849 Courville Drive	Transaction ID: PR824858023244
	City State Zip Code Bloomfield Hills MI 48302-1020	Amount of Each Receipt this Period 252.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager-Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 468.00	P/R Deduction (\$18.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Richard J Burgess	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 5163 Springdale Ct	Transaction ID: PR824858223244
	City State Zip Code Clarkston MI 48348-5039	Amount of Each Receipt this Period 406.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Blue Cross Blue Shield of Michigan Occupation Director - Regional Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 754.00	P/R Deduction (\$29.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Annette M Sabatella	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 411 Saddle Lane	Transaction ID: PR824858523244
	City State Zip Code Grs Pt Wds MI 48236-2728	Amount of Each Receipt this Period 406.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Blue Cross Blue Shield of Michigan Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 754.00	P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	▶	1064.00
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 177 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Ann M Kulling	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 3617 Lk Oakland Shrs	Transaction ID: PR824859123244
	City State Zip Code Waterford MI 48329-2150	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Blue Cross Blue Shield of Michigan Occupation Team Leader II Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00	P/R Deduction (\$9.00 Bi-W- eekly)

B.	Full Name (Last, First, Middle Initial) Carol E Gawronski	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 12240 Rohn Road	Transaction ID: PR824859823244
	City State Zip Code Fenton MI 48430-9519	Amount of Each Receipt this Period 406.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Blue Cross Blue Shield of Michigan Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 754.00	P/R Deduction (\$29.00 Bi- Weekly)

C.	Full Name (Last, First, Middle Initial) John J Peters	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 24681 Sarah Flynn Dr.	Transaction ID: PR824859923244
	City State Zip Code Novi MI 48374-2919	Amount of Each Receipt this Period 182.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager-Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00	P/R Deduction (\$13.00 Bi- Weekly)

SUBTOTAL of Receipts This Page (optional)	714.00
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 178 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Craig A Smith

Mailing Address 7141 Placita Ct.

City State Zip Code
Gd Rapids MI 49546-7234

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager-Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824860123244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Gregory A Mays

Mailing Address 33865 Trillium Court

City State Zip Code
Livonia MI 48150-3685

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director - Regional Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824860223244
Amount of Each Receipt this Period: 406.00
P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Jayne E Scott

Mailing Address 2939 Muirwood Ct

City State Zip Code
Waterford MI 48329-2396

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager Admin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824860923244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **910.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 179 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Regina R. Jamerson

Mailing Address 6875 Chase Court

City State Zip Code
W Bloomfield MI 48322-3292

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Director - Regional Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR824861623244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Rodester J Begosa

Mailing Address 34270 Trillium Court

City State Zip Code
Livonia MI 48150-3689

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Manager-Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR824861723244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Gary R Gavin

Mailing Address 23784 Wintergreen

City State Zip Code
Novi MI 48374-3680

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
VP Key & Large Group Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1170.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR824862123244

Amount of Each Receipt this Period
630.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **1134.00**

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 180 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Richard J Nelson	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 16184 Nathan	Transaction ID: PR824863723244
	City State Zip Code Macomb Township MI 48044-4960	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Finance Shared Srvc Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 234.00	P/R Deduction (\$9.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Julia M Kuks	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 1073 Magnolia	Transaction ID: PR824864523244
	City State Zip Code Inkster MI 48141-1731	Amount of Each Receipt this Period 252.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Manager Sales Infrm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 468.00	P/R Deduction (\$18.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Martha M Spenny	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 23633 Berg Rd	Transaction ID: PR824864623244
	City State Zip Code Southfield MI 48034-4146	Amount of Each Receipt this Period 406.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 754.00	P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	784.00
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 181 / 386

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Camille K Forster		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 9035 Woodlore South Dr.		Transaction ID: PR824865423244		
	City Plymouth	State MI	Zip Code 48170-3499	Amount of Each Receipt this Period 406.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$29.00 Bi-Weekly)		
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Director	Aggregate Year-to-Date 754.00		

B.	Full Name (Last, First, Middle Initial) Delisa D Norris		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 26589 Summerdale		Transaction ID: PR824866123244		
	City Southfld	State MI	Zip Code 48034-2223	Amount of Each Receipt this Period 182.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$13.00 Bi-Weekly)		
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Tech Solutions Architect	Aggregate Year-to-Date 338.00		

C.	Full Name (Last, First, Middle Initial) Judith M Canavan		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 4018 Vassar St		Transaction ID: PR824868023244		
	City Dearborn Heights	State MI	Zip Code 48125-2403	Amount of Each Receipt this Period 182.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$13.00 Bi-Weekly)		
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager	Aggregate Year-to-Date 338.00		

SUBTOTAL of Receipts This Page (optional)

770.00

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 182 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Gerald S Glass	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 21489 Glacier Dr	Transaction ID: PR824875223244
	City State Zip Code Macomb MI 48044-1841	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Team Lead Sr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00	P/R Deduction (\$9.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Kenneth J Setera	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 46273 Glen Pointe Dr	Transaction ID: PR824877423244
	City State Zip Code Shelby Township MI 48315-6126	Amount of Each Receipt this Period 406.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 754.00	P/R Deduction (\$29.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Mary H Wessner	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 713 Hutchins	Transaction ID: PR824878823244
	City State Zip Code Ann Arbor MI 48103-4801	Amount of Each Receipt this Period 182.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Systems Analyst Sr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00	P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	714.00
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 183 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Barry J O'Hara

Mailing Address 16404 Collinson Ave

City State Zip Code
E Pointe MI 48021-3024

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Application Developer Sr

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824879223244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
Charmaine M Stevens

Mailing Address 47011 Mornington Rd

City State Zip Code
Canton MI 48188-3000

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 468.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824881923244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)
Linda A Jamison

Mailing Address 23676 Paddock Dr.

City State Zip Code
Frmgtn Hls MI 48336-2226

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Application Developer Sr

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824882423244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

SUBTOTAL of Receipts This Page (optional)

504.00

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 184 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Rosemary Gundel

Mailing Address 52105 Loon Ct

City State Zip Code
Shelby Township MI 48315-6946

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824882623244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Savita S Potnis

Mailing Address 2738 Santia Drive

City State Zip Code
Troy MI 48085-3981

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Application Developer Adv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824884323244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W-ekly)

C.

Full Name (Last, First, Middle Initial)
Leon J Johnson Jr

Mailing Address 15505 Grandville

City State Zip Code
Detroit MI 48223-1772

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Operations Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824886523244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W-ekly)

SUBTOTAL of Receipts This Page (optional) ▶ **504.00**

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 185 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Lawrence Tomenello		Date of Receipt
	Mailing Address 38040 Huron Pointe Dr		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Harrsn Twp	MI	48045-2831
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager	Transaction ID: PR824887523244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="468.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="252.00"/>
		P/R Deduction (\$18.00 Bi-Weekly)	

B.	Full Name (Last, First, Middle Initial) Lawrence G Hoffman		Date of Receipt
	Mailing Address 6872 Cedarbrook Dr		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Bloomfield Hills	MI	48301-3017
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Technology Architect	Transaction ID: PR824888623244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="468.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="252.00"/>
		P/R Deduction (\$18.00 Bi-Weekly)	

C.	Full Name (Last, First, Middle Initial) Eunice M Anderson		Date of Receipt
	Mailing Address 9115 Brady		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Redford	MI	48239-1533
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Auditor II	Transaction ID: PR824888723244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="234.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="126.00"/>
		P/R Deduction (\$9.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="630.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 186 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
William G Wilson
Mailing Address 29803 Keller Dr

City State Zip Code
Warren MI 48088-3958

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Business Analyst Sr

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824888923244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
Kimberlie A Bodner
Mailing Address 8239 Horsemill Rd

City State Zip Code
Grosse Ile MI 48138-1163

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824889423244

Amount of Each Receipt this Period
182.00

P/R Deduction (\$18.00 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)
Gregory N Etchill
Mailing Address 3251 Kilburn Park Circle

City State Zip Code
Ann Arbor MI 48105-4125

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Systems Administrator Spec

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824890523244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$6.00 Bi-W-
eekly)

SUBTOTAL of Receipts This Page (optional)

434.00

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 187 / 386
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Joseph G Gavulic		Date of Receipt
	Mailing Address 33421 Meldrum		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Chesterfield	MI	48047-3459
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Security Analyst	Transaction ID: PR824890923244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="225.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="126.00"/>
		P/R Deduction (\$9.00 Bi-W- eekly)	

B.	Full Name (Last, First, Middle Initial) Kathleen P Wodecki		Date of Receipt
	Mailing Address 7640 Barnsbury		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	W Blmfld	MI	48324-3612
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager	Transaction ID: PR824892223244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="468.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="252.00"/>
		P/R Deduction (\$18.00 Bi- Weekly)	

C.	Full Name (Last, First, Middle Initial) Marchelle R Plummer		Date of Receipt
	Mailing Address 2104 Bryanston Cresent		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Detroit	MI	48207-3818
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Systems Analyst Adv	Transaction ID: PR824896823244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="234.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="126.00"/>
		P/R Deduction (\$9.00 Bi-W- eekly)	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="504.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 188 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Thomas J Wegienek
Mailing Address PO Box 361037
City Grosse Pte State MI Zip Code 48236-5037
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Technology Specialist Sr
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824897323244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$9.00 Bi-W-weekly)

B. Full Name (Last, First, Middle Initial)
Susan M Schrot
Mailing Address 36242 Jared
City Strlg Hts State MI Zip Code 48312-3237
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Sr. Financial Coordinator
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824899423244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$9.00 Bi-W-weekly)

C. Full Name (Last, First, Middle Initial)
Janet P Macqueen
Mailing Address 3214 Chesapeake Dr
City String Hts State MI Zip Code 48314-1869
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation VP Chief Info Officer
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1170.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824899523244
Amount of Each Receipt this Period 630.00
P/R Deduction (\$60.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 882.00
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 189 / 386

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Nutan R Oak

Mailing Address 6537 Red Oak Lane

City State Zip Code
Troy MI 48098-5240

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 338.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	9

Transaction ID: PR824900523244

Amount of Each Receipt this Period
182.00

P/R Deduction (\$5.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
Karen J Smahay

Mailing Address 29266 Ursuline Street

City State Zip Code
St Clr Sh MI 48081-3262

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 208.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	9

Transaction ID: PR824901423244

Amount of Each Receipt this Period
112.00

P/R Deduction (\$9.00 Bi-W-
eekly)

C.

Full Name (Last, First, Middle Initial)
Susan H Remisiewicz

Mailing Address 18432 Stamford St

City State Zip Code
Livonia MI 48152-4905

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 468.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	9

Transaction ID: PR824905023244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

546.00

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 190 / 386

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Joseph A Fritsch

Mailing Address 4150 Gotwick

City State Zip Code
Orion Twp MI 48359-1888

FEC ID number of contributing federal political committee. C

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Technology Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824907023244

Amount of Each Receipt this Period
140.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
David W Bulmer

Mailing Address 11321 Morgan Street

City State Zip Code
Plymouth MI 48170-4436

FEC ID number of contributing federal political committee. C

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Technology Architect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824908323244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)
Annette M Robertson

Mailing Address 31264 Lund Ave

City State Zip Code
Warren MI 48093-7917

FEC ID number of contributing federal political committee. C

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824908623244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional) ► 644.00

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 191 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Marcia D Ford

Mailing Address 600 Montclair St

City State Zip Code
Detroit MI 48214-4617

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Application Developer Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824909623244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W-weekly)

B.

Full Name (Last, First, Middle Initial)
Julie A Lambert

Mailing Address 13773 Sterling Oaks Dr

City State Zip Code
Strlg Hts MI 48313-4382

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824909723244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W-weekly)

C.

Full Name (Last, First, Middle Initial)
David A Black

Mailing Address 8944 Crosley

City State Zip Code
Redford MI 48239-1536

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Application Developer Adv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824910723244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W-weekly)

SUBTOTAL of Receipts This Page (optional) ► **378.00**

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 192 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Karen R Wehba
Mailing Address 35043 Griswald St
City Clntrn Twp State MI Zip Code 48035-2616
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Application Developer Adv
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824911223244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$9.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Kevin J Schneider
Mailing Address 1219 Chelsea Blvd
City Oxford State MI Zip Code 48371-6729
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Technology Specialist Sr
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824911623244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$9.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Susan L Kuypers
Mailing Address 21524 Boyd Court
City Macomb State MI Zip Code 48044-3068
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Director
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 754.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824914223244
Amount of Each Receipt this Period 406.00
P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 658.00
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 193 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Gino H Polidori Jr	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 42270 Oakland Dr	Transaction ID: PR824915123244
	City State Zip Code Canton MI 48188-5214	Amount of Each Receipt this Period 207.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 315.00	P/R Deduction (\$18.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Richard J Phillips	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 40101 W Huron River	Transaction ID: PR824915223244
	City State Zip Code Romulus MI 48174-4811	Amount of Each Receipt this Period 252.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Mgr Finance Business Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 468.00	P/R Deduction (\$18.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Joyce A Anderson	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 455 Parkview Dr	Transaction ID: PR824915623244
	City State Zip Code Detroit MI 48214-4173	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Team Lead Sr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00	P/R Deduction (\$6.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	▶	585.00
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 194 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Karen P Spring
Mailing Address 5267 Kristi Lane
City Commrce Twp State MI Zip Code 48382-3356
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Assoc Dir Medicaid Liaison
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 754.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824916923244
Amount of Each Receipt this Period 406.00
P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Diane J Morin
Mailing Address 51 Mohawk
City Pontiac State MI Zip Code 48341-1121
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824917623244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$18.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Timothy J Rafferty
Mailing Address 14128 Thames
City Shelby Twp State MI Zip Code 48315-5437
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Health Care Manager
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824919023244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **658.00**
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 195 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) John C Golding	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 42211 Garfield Rd Apt 136	Transaction ID: PR824919523244
	City State Zip Code Clinton Township MI 48038-1648	Amount of Each Receipt this Period 630.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Sr Dir IT Systems Ops Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1170.00	P/R Deduction (\$45.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Asif A Bakhsh	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 4675 Avondale Terrace	Transaction ID: PR824920023244
	City State Zip Code Bloomfield Hls MI 48304-3601	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Sr Business Analyst Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00	P/R Deduction (\$9.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Karen J Lee	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 14717 Wildbrook	Transaction ID: PR824921423244
	City State Zip Code Belleville MI 48111-5194	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Team Lead Adv Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00	P/R Deduction (\$6.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	882.00
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 196 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Ian C Baringer

Mailing Address 39697 Hillary Dr

City State Zip Code
Canton MI 48187-4207

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Network Analyst Adv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824921923244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-W-weekly)

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

Mailing Address 2843 Belle Glade

City State Zip Code
Toledo OH 43617-2302

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824922623244
 Amount of Each Receipt this Period: 210.00
 P/R Deduction (\$6.00 Bi-W-weekly)

C. Full Name (Last, First, Middle Initial)
Elizabeth A Irick

Mailing Address 703 N Highland St

City State Zip Code
Dearborn MI 48128-1654

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Business Analyst Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824922823244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$6.00 Bi-W-weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **462.00**

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 197 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
James L Fortner

Mailing Address 2016 Laurel Oak Dr N

City State Zip Code
Howell MI 48855-7673

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Team Lead Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR824923023244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
Thomas L Adams

Mailing Address 37735 Evergreen Dr.

City State Zip Code
Strlg Hts MI 48310-3930

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Systems Engineer Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR824925723244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

C.

Full Name (Last, First, Middle Initial)
Brian S Dehetre

Mailing Address 610 Cardwell

City State Zip Code
Gardn Cty MI 48135-3145

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Technology Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
338.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR824927323244

Amount of Each Receipt this Period
182.00

P/R Deduction (\$13.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **434.00**

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 198 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Michael R Benoit

Mailing Address 34921 25 Mile Road

City State Zip Code
Chesterfield MI 48047-2746

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824927423244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Joseph F Vondracek

Mailing Address 45128 Dunbarton Dr

City State Zip Code
Novi MI 48375-3806

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824928023244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$13.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Laurence R Binder

Mailing Address 32300 Maryland

City State Zip Code
Livonia MI 48150-3814

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Technology Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824930323244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **840.00**

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 199 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Gail A Hooper		Date of Receipt
	Mailing Address 34607 Northland Dr		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Livonia	State MI	Zip Code 48152-1156
	FEC ID number of contributing federal political committee. C		Transaction ID: PR824931123244
	Name of Employer Blue Cross Blue Shield of Michigan		Occupation Technology Consultant
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="338.00"/>	Amount of Each Receipt this Period <input type="text" value="182.00"/>
			P/R Deduction (\$18.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) James M Kett		Date of Receipt
	Mailing Address 18876 Seminole		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Redford	State MI	Zip Code 48240-2038
	FEC ID number of contributing federal political committee. C		Transaction ID: PR824932123244
	Name of Employer Blue Cross Blue Shield of Michigan		Occupation Team Lead Sr
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="234.00"/>	Amount of Each Receipt this Period <input type="text" value="126.00"/>
			P/R Deduction (\$9.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Joanne F Rusch		Date of Receipt
	Mailing Address 4171 Fallow		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City W Blmfld	State MI	Zip Code 48323-1242
	FEC ID number of contributing federal political committee. C		Transaction ID: PR824932723244
	Name of Employer Blue Cross Blue Shield of Michigan		Occupation Principal Architect
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1170.00"/>	Amount of Each Receipt this Period <input type="text" value="630.00"/>
			P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="938.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 200 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Robert F Austin	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 10409 N Dixie Hwy	Transaction ID: PR824933323244
	City State Zip Code S Rockwd MI 48179-9772	Amount of Each Receipt this Period 182.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Tech Solutions Architect Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 338.00	P/R Deduction (\$9.00 Bi-W- eekly)

B.	Full Name (Last, First, Middle Initial) Debra M Fletcher	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 11626 Fairview	Transaction ID: PR824933823244
	City State Zip Code Strlg Hts MI 48312-2154	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Application Developer Adv Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 234.00	P/R Deduction (\$6.00 Bi-W- eekly)

C.	Full Name (Last, First, Middle Initial) Catherine L Hodges	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 38139 Mallory	Transaction ID: PR824934423244
	City State Zip Code Livonia MI 48154-1109	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Analyst-Rating IV Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 234.00	P/R Deduction (\$9.00 Bi-W- eekly)

SUBTOTAL of Receipts This Page (optional)	434.00
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 201 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Kathryn L Wilson		Date of Receipt
	Mailing Address 1361 Palmer		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Plymouth	MI	48170-2069
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager Sales Infrm	Transaction ID: PR824934523244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="468.00"/>	
		Amount of Each Receipt this Period <input type="text" value="252.00"/>	
		P/R Deduction (\$18.00 Bi-Weekly)	

B.	Full Name (Last, First, Middle Initial) Kimberly S Lazarow		Date of Receipt
	Mailing Address 20319 White Oaks		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Clntn Twp	MI	48036-4108
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Ex Assistant To VP	Transaction ID: PR824934623244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="234.00"/>	
		Amount of Each Receipt this Period <input type="text" value="126.00"/>	
		P/R Deduction (\$6.00 Bi-Weekly)	

C.	Full Name (Last, First, Middle Initial) Joseph D Kearney		Date of Receipt
	Mailing Address 2391 Lexington Cir S		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Canton	MI	48188-5907
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Director Investments	Transaction ID: PR824935423244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="468.00"/>	
		Amount of Each Receipt this Period <input type="text" value="252.00"/>	
		P/R Deduction (\$13.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="630.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 202 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Janice M Gibson
Mailing Address 28272 Fontana
City Southfld State MI Zip Code 48076-2409
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Ex Assistant To VP
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824936023244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$9.00 Bi-W- weekly)

B. Full Name (Last, First, Middle Initial)
Carolynn Walton
Mailing Address 5835 Pinecroft Dr.
City W Blmfld State MI Zip Code 48322-1669
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation VP & Treasurer
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1170.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824936223244
Amount of Each Receipt this Period 630.00
P/R Deduction (\$45.00 Bi- Weekly)

C. Full Name (Last, First, Middle Initial)
Patricia A Crowley
Mailing Address 891 Hampton Rd
City Grs Pt Wds State MI Zip Code 48236-1341
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Analyst II-Risk Mgmt Financial
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824936923244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$9.00 Bi-W- weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 882.00
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 203 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Mark S O'Neill

Mailing Address 13998 Merrie Meadow Ln

City State Zip Code
South Lyon MI 48178-9174

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director - Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824937423244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Dave M Krage

Mailing Address 420 Lasalle Blvd

City State Zip Code
Lansing MI 48912-4129

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Health Care Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824939223244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Piyush J Desai

Mailing Address 3620 Beechtree Ln

City State Zip Code
Okemos MI 48864-3864

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824940123244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **784.00**

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 204 / 386
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Sandra L Beckley		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 24703 Blackmar		Transaction ID: PR824940923244
	City Warren	State MI	Zip Code 48091-4407
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Analyst - Senior	P/R Deduction (\$9.00 Bi-W- eekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00		

B.	Full Name (Last, First, Middle Initial) Rachel A White		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 3287 Silverbrook Dr		Transaction ID: PR824941223244
	City Rochester	State MI	Zip Code 48306-4703
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 140.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Senior Health Care Analyst	P/R Deduction (\$18.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

C.	Full Name (Last, First, Middle Initial) Lisa G Redick		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 14830 Belmont		Transaction ID: PR824941623244
	City Allen Pk	State MI	Zip Code 48101-1604
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 182.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Sr Account Rep	P/R Deduction (\$9.00 Bi-W- eekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.00		

SUBTOTAL of Receipts This Page (optional)	448.00
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 205 / 386
(check only one)

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Rachelle A Tomlinson

Mailing Address 49791 Keycove

City State Zip Code
Chestrfld Twp MI 48047-4308

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Ld Financial Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824945123244
Amount of Each Receipt this Period: 140.00
P/R Deduction (\$10.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
John E Duzy

Mailing Address 22893 Sagebrush

City State Zip Code
Novi MI 48375-4166

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824947623244
Amount of Each Receipt this Period: 182.00
P/R Deduction (\$13.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Paul S Nehls

Mailing Address 1654 Delmonte

City State Zip Code
Walled Lake MI 48390-1921

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Finance Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824947723244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 574.00

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 206 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Edwin M David Jr

Mailing Address 17547 St Marys

City State Zip Code
Detroit MI 48235-3174

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Sr Financial Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824947823244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Patricia A Fritsch

Mailing Address 37149 Weymouth

City State Zip Code
Livonia MI 48152-4095

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824950723244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Carl E Pate Jr, Jr

Mailing Address 2036 Church Place

City State Zip Code
Trenton MI 48183-2192

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Attorney Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824951123244
Amount of Each Receipt this Period: 182.00
P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 560.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 207 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Scott A Freeman
 Mailing Address 30686 Young
 City State Zip Code
Gibraltar MI 48173-9568
 FEC ID number of contributing federal political committee. C
 Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Systems Analyst Sr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00
 Date of Receipt M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9
Transaction ID: PR824951223244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$9.00 Bi-W-
eekly)

B. Full Name (Last, First, Middle Initial)
Audrey J Harvey
 Mailing Address 25465 Waycross
 City State Zip Code
Southfld MI 48034-2206
 FEC ID number of contributing federal political committee. C
 Name of Employer: Blue Cross Blue Shield of Michigan Occupation: VP & Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1170.00
 Date of Receipt M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9
Transaction ID: PR824951323244
 Amount of Each Receipt this Period 630.00
 P/R Deduction (\$45.00 Bi-W-
Weekly)

C. Full Name (Last, First, Middle Initial)
Kimberly R Dunklin-Mapleh
 Mailing Address 16519 Lawton St
 City State Zip Code
Detroit MI 48221-3147
 FEC ID number of contributing federal political committee. C
 Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Ex Assistant To VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00
 Date of Receipt M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9
Transaction ID: PR824951423244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$9.00 Bi-W-
eekly)

SUBTOTAL of Receipts This Page (optional) 882.00
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 208 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Linda B Ewell

Mailing Address 21901 Westhampton

City State Zip Code
Oak Park MI 48237-3803

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Auditor II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824951623244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Kenneth A Bluhm

Mailing Address 6187 Brittany Tree

City State Zip Code
Troy MI 48085-1085

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824951923244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Gemma T Kraus

Mailing Address 38177 Plumhollow Dr

City State Zip Code
Sterling Heights MI 48312-1252

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Finance Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824952723244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **714.00**

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 209 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Toya B Thomas	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 30351 Norwich Dr.	Transaction ID: PR824953123244
	City State Zip Code Novi MI 48377-3912	Amount of Each Receipt this Period 182.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Corporate Tax Advisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 338.00	P/R Deduction (\$13.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Katherine M Roberts	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 24748 Emily Dr.	Transaction ID: PR824953723244
	City State Zip Code Browns town MI 48183-5423	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Ex Assistant To VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 234.00	P/R Deduction (\$9.00 Bi-W-ekly)

C.	Full Name (Last, First, Middle Initial) Shanda R Dudley	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 5475 Vincennes Dr.	Transaction ID: PR824953823244
	City State Zip Code Bloomfld MI 48302-2561	Amount of Each Receipt this Period 182.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Finance Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 338.00	P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	490.00
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 210 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Worline Felton

Mailing Address 2421 Liddesdale

City State Zip Code
Detroit MI 48217-1149

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Sr Financial Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR824953923244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
Valerie L Keesee

Mailing Address 3400 E Coon Lake Rd

City State Zip Code
Howell MI 48843-9420

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
754.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR824954123244

Amount of Each Receipt this Period
406.00

P/R Deduction (\$29.00 Bi-W-
Weekly)

C.

Full Name (Last, First, Middle Initial)
Rene M Brewer

Mailing Address 41 Kensington

City State Zip Code
Pleasant Ridge MI 48069-1219

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
338.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR824954423244

Amount of Each Receipt this Period
182.00

P/R Deduction (\$3.00 Bi-W-
eekly)

SUBTOTAL of Receipts This Page (optional) ▶ **714.00**

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 211 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Catherine S Kowalsky</p> <p>Mailing Address 455 Crystalia Dr</p> <p>City State Zip Code Commrce Twp MI 48382-2529</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Blue Cross Blue Shield of Michigan</p> <p>Occupation Analyst - Senior</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 260.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9</p> <p>Transaction ID: PR824954923244</p> <p>Amount of Each Receipt this Period 140.00</p> <p>P/R Deduction (\$10.00 Bi-Weekly)</p>
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<p>B. Full Name (Last, First, Middle Initial) Brenda B Bove</p> <p>Mailing Address 765 Roslyn</p> <p>City State Zip Code Grs Pt Wds MI 48236-1347</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Blue Cross Blue Shield of Michigan</p> <p>Occupation Analyst - Senior</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 234.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9</p> <p>Transaction ID: PR824955123244</p> <p>Amount of Each Receipt this Period 126.00</p> <p>P/R Deduction (\$9.00 Bi-Weekly)</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) Diana M Glaab</p> <p>Mailing Address 24805 Belton Ln</p> <p>City State Zip Code Dearbn Hts MI 48127-1377</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Blue Cross Blue Shield of Michigan</p> <p>Occupation Auto National Fin Consultant</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 468.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9</p> <p>Transaction ID: PR824955523244</p> <p>Amount of Each Receipt this Period 252.00</p> <p>P/R Deduction (\$18.00 Bi-Weekly)</p>
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SUBTOTAL of Receipts This Page (optional)	518.00
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 212 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Daniel Mroz		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 17094 Euclid		Transaction ID: PR824955623244
	City Allen Pk	State MI	Zip Code 48101-2827
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 54.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Financial Consultant	P/R Deduction (\$18.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

B.	Full Name (Last, First, Middle Initial) Russell J Cameron		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 8677 Stout		Transaction ID: PR824955823244
	City Grosse Ile	State MI	Zip Code 48138-1394
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 182.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Consultant - Business	P/R Deduction (\$13.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.00		

C.	Full Name (Last, First, Middle Initial) Michael L Namee		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 46650 Donahue		Transaction ID: PR824958723244
	City Macomb	State MI	Zip Code 48044-3427
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Systems Analyst Adv	P/R Deduction (\$9.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00		

SUBTOTAL of Receipts This Page (optional)	362.00
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 213 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Dominick A Mitchell III
 Mailing Address 41500 Ladywood Ct
 City Northville State MI Zip Code 48167-2342
 Date of Receipt 12 / 31 / 2009
Transaction ID: PR824959123244
 Amount of Each Receipt this Period 406.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Blue Cross Blue Shield of Michigan Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 754.00
 P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Ronald Wood
 Mailing Address 29225 Lake Park
 City Frmqtn Hls State MI Zip Code 48331-2661
 Date of Receipt 12 / 31 / 2009
Transaction ID: PR824959723244
 Amount of Each Receipt this Period 630.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Blue Cross Blue Shield of Michigan Occupation VP Underwriting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 1170.00
 P/R Deduction (\$45.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Scott Eicher
 Mailing Address 3355 Essex Ct
 City Troy State MI Zip Code 48084-2722
 Date of Receipt 12 / 31 / 2009
Transaction ID: PR824961723244
 Amount of Each Receipt this Period 406.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Blue Cross Blue Shield of Michigan Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 754.00
 P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 1442.00
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 214 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Curtis J Schoenjahn	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 3660 Seney Dr	Transaction ID: PR824962223244
	City State Zip Code Lake Orion MI 48360-2706	Amount of Each Receipt this Period 406.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$29.00 Bi-Weekly)
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.00	

B.	Full Name (Last, First, Middle Initial) Donna D Fields	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 19366 Wisconsin	Transaction ID: PR824962423244
	City State Zip Code Detroit MI 48221-1531	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$9.00 Bi-Weekly)
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Technician Research	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

C.	Full Name (Last, First, Middle Initial) Saundra A Griffin	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 41497 Twain Pl	Transaction ID: PR824962623244
	City State Zip Code Novi MI 48377-2860	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$9.00 Bi-Weekly)
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Business Analyst Sr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

SUBTOTAL of Receipts This Page (optional)	658.00
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 215 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Kenneth L Krisan

Mailing Address 1921 Dogwood Trail

City Walled Lk State MI Zip Code 48390-3914

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR824963923244

Amount of Each Receipt this Period 406.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Parrish Roberts

Mailing Address 30768 Sunderland Dr

City Farmington Hills State MI Zip Code 48331-5915

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR824964023244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$6.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Michael A Ross

Mailing Address 43913 Palisades

City Canton State MI Zip Code 48187-3222

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR824965023244

Amount of Each Receipt this Period 252.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **784.00**

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 216 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Cynthia L Esmont
Mailing Address 48846 Cross Creek Dr
City Macomb Twp State MI Zip Code 48044-5590
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Team Leader I
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824966623244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$9.00 Bi-W-weekly)

B. Full Name (Last, First, Middle Initial)
Cynthia M Garofali
Mailing Address 3571 Salem
City Troy State MI Zip Code 48084-1145
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824967223244
Amount of Each Receipt this Period 182.00
P/R Deduction (\$2.00 Bi-W-weekly)

C. Full Name (Last, First, Middle Initial)
Diane M Wolfenden
Mailing Address 34397 Orsini Dr.
City Sterling Heights State MI Zip Code 48312-5773
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Director - Regional Sales
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 754.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824967823244
Amount of Each Receipt this Period 406.00
P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 714.00
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 217 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
John J Dunn
 Mailing Address 3153 Davenport
 City State Zip Code
 Rochester Hills MI 48309-4283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Blue Cross Blue Shield of Michigan
 Occupation: VP Middle & Small Grp Sales
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1170.00
 Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824968523244
 Amount of Each Receipt this Period: 630.00
 P/R Deduction (\$45.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Theodore P Panourgias
 Mailing Address 5000 Town Center #2602
 City State Zip Code
 Southfld MI 48075-1117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Blue Cross Blue Shield of Michigan
 Occupation: Actuary-Associate
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 338.00
 Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824968723244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$13.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Robert C Maguire
 Mailing Address 11031 Hillcrest St
 City State Zip Code
 Livonia MI 48150-2921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Blue Cross Blue Shield of Michigan
 Occupation: Actuary-Assistant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00
 Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824970223244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 938.00
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 218 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Erika Monroe

Mailing Address 15531 Brookstone Dr

City State Zip Code
Clinton Township MI 48035-1060

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Dir Actuarial Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824970323244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Alan E Dahlen

Mailing Address 5540 Covington Apt 205

City State Zip Code
Dearborn MI 48126-2667

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Actuary-Associate Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824970623244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$13.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Cheri A Lehto

Mailing Address 4051 Wakefield Rd

City State Zip Code
Berkley MI 48072-1409

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824971123244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **686.00**

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 219 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Laurie Ann McIntee	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 3356 S. Blvd., E.	Transaction ID: PR824971523244
	City State Zip Code Blmfld Hls MI 48304-1155	Amount of Each Receipt this Period 198.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$9.00 Bi-W-weekly)
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Senior Health Care Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00	

B.	Full Name (Last, First, Middle Initial) Ronald E Branch	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 29225 Sunridge	Transaction ID: PR824971723244
	City State Zip Code Farmington Hills MI 48334-4012	Amount of Each Receipt this Period 406.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$6.00 Bi-W-weekly)
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.00	

C.	Full Name (Last, First, Middle Initial) Marilyn J Smith	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 2485 Kimberly Fair	Transaction ID: PR824971923244
	City State Zip Code Rochester Hills MI 48309-2061	Amount of Each Receipt this Period 406.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$29.00 Bi-Weekly)
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.00	

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: PAGE 220 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Luana M Karazia

Mailing Address 16279 Huff

City State Zip Code
Livonia MI 48154-1408

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 338.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824972123244

Amount of Each Receipt this Period
182.00

P/R Deduction (\$13.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
James D Mills

Mailing Address 37753 Chase Ct

City State Zip Code
Livonia MI 48150-5040

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Director

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 754.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824972423244

Amount of Each Receipt this Period
406.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Claudia J Swink

Mailing Address 4459 Forest Ave

City State Zip Code
Waterford MI 48328-1113

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Director

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 638.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824973223244

Amount of Each Receipt this Period
290.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

878.00

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 221 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Cynthia E Dion

Mailing Address 41584 Stonehenge Manor

City State Zip Code
Clinton Township MI 48038-4642

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Sr Dir Human Performance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824973323244
Amount of Each Receipt this Period: 406.00
P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Tina M Fenech

Mailing Address 41418 Chattman St

City State Zip Code
Novi MI 48375-4221

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Ex Assistant To SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824973423244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$6.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Debra L Knapp

Mailing Address 16289 Pine Ridge Dr N

City State Zip Code
Fraser MI 48026-5005

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824973623244
Amount of Each Receipt this Period: 182.00
P/R Deduction (\$6.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **714.00**

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 222 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Debra S Ross		Date of Receipt
	Mailing Address 24412 Curie St		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Warren	MI	48091-4428
	FEC ID number of contributing federal political committee. C		Transaction ID: PR824973823244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 468.00	<input type="text" value="252.00"/>
			P/R Deduction (\$18.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Beverly J Lentz		Date of Receipt
	Mailing Address 1921 Vineway Unit 35		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Canton	MI	48188-1852
	FEC ID number of contributing federal political committee. C		Transaction ID: PR824973923244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 468.00	<input type="text" value="252.00"/>
			P/R Deduction (\$18.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Laura S Dancsok		Date of Receipt
	Mailing Address 8253 Colony Dr #22		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Grosse Ile	MI	48138-1733
	FEC ID number of contributing federal political committee. C		Transaction ID: PR824974223244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager-Sales	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 468.00	<input type="text" value="252.00"/>
			P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="756.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 223 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Dwayne R Richardson

Mailing Address 16185 Glastonbury

City State Zip Code
Detroit MI 48219-4106

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Systems Analyst Adv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824976323244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
David J Spath

Mailing Address 36310 Gregory

City State Zip Code
Strlg Hts MI 48312-2809

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager Admin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824978023244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$13.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Rodney Ross

Mailing Address 1345 W Long Lake Rd

City State Zip Code
Bloomfield Hills MI 48302-1336

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824978423244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$13.00 Bi-Weekly)

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 224 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Cathy M Longo

Mailing Address 30790 Plum Lane

City State Zip Code
Madison Hts MI 48071-1504

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

Name of Employer Blue Cross Blue Shield of Michigan
Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824979123244

Amount of Each Receipt this Period
406.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Nita E Firestone

Mailing Address 7737 Collingwood

City State Zip Code
Brighton MI 48114-9459

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

Name of Employer Blue Cross Blue Shield of Michigan
Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824980623244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$13.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Debra A Pawlak

Mailing Address 24116 Twin Valley Ct

City State Zip Code
Farmingtn MI 48336-2355

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

Name of Employer Blue Cross Blue Shield of Michigan
Occupation Analyst - Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR824981223244

Amount of Each Receipt this Period
108.00

P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **766.00**

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 225 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Kimberly A Meisel

Mailing Address 19820 Fry

City Northville State MI Zip Code 48167-2632

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Technology Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR824983423244

Amount of Each Receipt this Period 252.00

P/R Deduction (\$13.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Lynn R Hall

Mailing Address 13539 Cunningham

City Southgate State MI Zip Code 48195-1187

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 352.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR824987723244

Amount of Each Receipt this Period 182.00

P/R Deduction (\$13.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Mark J Giroux

Mailing Address 2127 Woodland Ave

City Royal Oak State MI Zip Code 48073-3876

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR824990723244

Amount of Each Receipt this Period 406.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **840.00**

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 226 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Venus Pope

Mailing Address 819 Gardenia Blvd

City State Zip Code
Davison MI 48423-1250

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824991523244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$6.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Beth D Benson

Mailing Address 15860 Reedmere Ave

City State Zip Code
Beverly Hills MI 48025-5672

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager Admin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824991823244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Kathleen F Liu

Mailing Address 29632 Edward Pl

City State Zip Code
Livonia MI 48154-4440

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824992723244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **504.00**

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 227 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Wesley Shasko</p> <p>Mailing Address 43828 Nowland Dr</p> <p>City State Zip Code Canton MI 48188-1794</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Blue Cross Blue Shield of Michigan</p> <p>Occupation Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 468.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9</p> <p>Transaction ID: PR824993223244</p> <p>Amount of Each Receipt this Period 252.00</p> <p>P/R Deduction (\$18.00 Bi-Weekly)</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) Sharon E Hickman</p> <p>Mailing Address 26681 Belanger St</p> <p>City State Zip Code Roseville MI 48066-3186</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Blue Cross Blue Shield of Michigan</p> <p>Occupation Team Leader I</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 234.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9</p> <p>Transaction ID: PR824993423244</p> <p>Amount of Each Receipt this Period 126.00</p> <p>P/R Deduction (\$9.00 Bi-W-ekly)</p>
---	--

<p>C. Full Name (Last, First, Middle Initial) Judith L Wood</p> <p>Mailing Address 29425 Prestwick</p> <p>City State Zip Code Southfld MI 48076-5058</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Blue Cross Blue Shield of Michigan</p> <p>Occupation Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 338.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9</p> <p>Transaction ID: PR824993723244</p> <p>Amount of Each Receipt this Period 182.00</p> <p>P/R Deduction (\$9.00 Bi-W-ekly)</p>
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SUBTOTAL of Receipts This Page (optional)	560.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 228 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Dennis R Roegner
Mailing Address 41752 Broquet Dr
City Northville State MI Zip Code 48167-2402
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824994123244
Amount of Each Receipt this Period 182.00
P/R Deduction (\$13.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Rosemarie Cook
Mailing Address 11125 Mccabe Rd
City Brighton State MI Zip Code 48116-8527
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Medica Outside Sales Rep
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824996123244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$9.00 Bi-W-ekly)

C. Full Name (Last, First, Middle Initial)
Jennifer E Nosakowski
Mailing Address 1377 Morning Mist Dr
City Howell State MI Zip Code 48843-7012
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 468.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR824996923244
Amount of Each Receipt this Period 252.00
P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 560.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 229 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Kimberley C Bracey

Mailing Address 2697 Ferry Park

City State Zip Code
Detroit MI 48208-1119

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824997323244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Michael C Pedigo

Mailing Address 21620 Louise

City State Zip Code
St Clair Shores MI 48081-2870

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Portfolio Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR824997923244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$13.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Becky L Sexton

Mailing Address 29929 Meridian PI Apt 18202

City State Zip Code
Farmington Hills MI 48331-5873

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825000823244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 616.00

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 230 / 386
	(check only one)
<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"/>	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Dennis R Proctor		Date of Receipt
	Mailing Address 1012 Helen		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Garden City	MI	48135-3113
	FEC ID number of contributing federal political committee.		Transaction ID: PR825002223244
	C		Amount of Each Receipt this Period
		126.00	
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager-Account	P/R Deduction (\$6.00 Bi-W- eekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Other (specify) ▼		234.00	

B.	Full Name (Last, First, Middle Initial) Patricia A Slisinger		Date of Receipt
	Mailing Address 34518 Morningdale Dr		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Strlg Hts	MI	48312-5744
	FEC ID number of contributing federal political committee.		Transaction ID: PR825004223244
	C		Amount of Each Receipt this Period
		252.00	
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager	P/R Deduction (\$18.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Other (specify) ▼		468.00	

C.	Full Name (Last, First, Middle Initial) Mark E Elzy		Date of Receipt
	Mailing Address 18701 Pennington Dr		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Detroit	MI	48221-4115
	FEC ID number of contributing federal political committee.		Transaction ID: PR825005023244
	C		Amount of Each Receipt this Period
		140.00	
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager	P/R Deduction (\$9.00 Bi-W- eekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Other (specify) ▼		260.00	

SUBTOTAL of Receipts This Page (optional)	518.00
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 231 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Peggy S Gunns
Mailing Address 722 E Columbia St
City Mason State MI Zip Code 48854-1306
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 468.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825005523244
Amount of Each Receipt this Period 252.00
P/R Deduction (\$18.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Shane Evans
Mailing Address 14803 Robinwood
City Lansing State MI Zip Code 48906-9230
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825005823244
Amount of Each Receipt this Period 140.00
P/R Deduction (\$9.00 Bi-W-ekly)

C. Full Name (Last, First, Middle Initial)
Anthony Joseph Russo
Mailing Address 23003 Brookdale
City St Clr Sh State MI Zip Code 48082-2138
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 468.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825006023244
Amount of Each Receipt this Period 252.00
P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 644.00
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 232 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Sandra A Piper

Mailing Address 19060 Huntington

City State Zip Code
Harper Wds MI 48225-2088

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825006223244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$6.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mary A Van Tiem

Mailing Address 805 Leinster

City State Zip Code
Rchstr Hls MI 48309-2426

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director Asst Gen Auditor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825009423244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$18.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Terri D Simmons

Mailing Address 16231 Harden Circle

City State Zip Code
Southfield MI 48075-6923

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825011023244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 490.00

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 233 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Seth A Crawford		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 28736 Stonewall Court		Transaction ID: PR825011223244
	City Novi	State MI	Zip Code 48377-2720
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 630.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation VP Underwriting & Actural Svcs	P/R Deduction (\$45.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1170.00		

B.	Full Name (Last, First, Middle Initial) Lisa R Susin		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 42746 Bloomingdale		Transaction ID: PR825011523244
	City Sterling Heights	State MI	Zip Code 48314-2843
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 406.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Director	P/R Deduction (\$29.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.00		

C.	Full Name (Last, First, Middle Initial) Jacqueline P Jackson-Kelly		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 23190 Plumbrooke Dr		Transaction ID: PR825013523244
	City Southfld	State MI	Zip Code 48075-7809
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Trainer	P/R Deduction (\$9.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00		

SUBTOTAL of Receipts This Page (optional)	1162.00
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 234 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Alean Martin		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 23362 Hickory Creek		Transaction ID: PR825018723244		
	City Macomb Twp	State MI	Zip Code 48042-5029	Amount of Each Receipt this Period 182.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager	Aggregate Year-to-Date 338.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		P/R Deduction (\$13.00 Bi-Weekly)			

B.	Full Name (Last, First, Middle Initial) Chris J Maier		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 6061 Middle Lake Rd		Transaction ID: PR825018923244		
	City Clarkston	State MI	Zip Code 48346-2047	Amount of Each Receipt this Period 630.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation VP Claims & Enrollment	Aggregate Year-to-Date 1170.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		P/R Deduction (\$45.00 Bi-Weekly)			

C.	Full Name (Last, First, Middle Initial) Patricia A Bojicic		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 29223 Glencastle Court		Transaction ID: PR825019023244		
	City Frmgtn Hls	State MI	Zip Code 48336-1416	Amount of Each Receipt this Period 406.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Director	Aggregate Year-to-Date 754.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		P/R Deduction (\$29.00 Bi-Weekly)			

SUBTOTAL of Receipts This Page (optional)	▶	1218.00
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 235 / 386

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Sean M Drate

Mailing Address 722 Albany

City State Zip Code
Ferndale MI 48220-1829

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 468.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825019123244

Amount of Each Receipt this Period

252.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Charlene Scott

Mailing Address 24467 Orchard Lake Rd

City State Zip Code
Farmington Hills MI 48336-1919

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Team Lead Sr

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825020523244

Amount of Each Receipt this Period

126.00

P/R Deduction (\$9.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Sandra G Kempton

Mailing Address 19522 Northridge
Bldg 2

City State Zip Code
Northville MI 48167-2912

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Team Leader II

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825021423244

Amount of Each Receipt this Period

126.00

P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶

504.00

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 236 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Terry R Keller	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 1045 Peavy	Transaction ID: PR825022623244
	City State Zip Code Howell MI 48843-7814	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 234.00	P/R Deduction (\$6.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Lisa M Dante	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address PO Box 544	Transaction ID: PR825023723244
	City State Zip Code Royal Oak MI 48068-0544	Amount of Each Receipt this Period 126.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Analyst - Senior Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 234.00	P/R Deduction (\$9.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Theodore F Pierzchala	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 6046 Meadowgreene	Transaction ID: PR825023823244
	City State Zip Code Waterford Twp MI 48327-2943	Amount of Each Receipt this Period 252.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Team Leader II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 468.00	P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	504.00
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 237 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Renee M Rabideau

Mailing Address 1699 S Shore Dr

City State Zip Code
Rochester Hills MI 48307-4314

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825025123244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Shawn M Walkiewicz

Mailing Address 2481 Ellwood Ave

City State Zip Code
Berkley MI 48072-3209

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager Admin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825026223244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$6.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Elaine C Barber

Mailing Address 28350 Lockdale St Apt 301

City State Zip Code
Southfield MI 48034-1971

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Team Leader II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825026723244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **658.00**

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 238 / 386

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Cindy M Szabo

Mailing Address 15512 Leona

City State Zip Code
Redford Twp MI 48239-3612

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Process Specialist Sr

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825027323244

Amount of Each Receipt this Period

126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)

Brenda A Selle

Mailing Address 11305 Cemetery Rd

City State Zip Code
Erie MI 48133-9734

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager Admin

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 754.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825027723244

Amount of Each Receipt this Period

406.00

P/R Deduction (\$29.00 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Kirk W Vogelei

Mailing Address 1304 Kinlock

City State Zip Code
Troy MI 48098-2041

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 754.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825028323244

Amount of Each Receipt this Period

406.00

P/R Deduction (\$29.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

938.00

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 239 / 386

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Diane L Flint

Mailing Address 14240 Talbot

City State Zip Code
Oak Park MI 48237-1183

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 468.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825028523244

Amount of Each Receipt this Period

252.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Teressa D Larkin

Mailing Address 249 Engelwood

City State Zip Code
Detroit MI 48202-1106

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Team Leader I

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825030823244

Amount of Each Receipt this Period

126.00

P/R Deduction (\$9.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Jeffrey A Strauss

Mailing Address 4593 Racewood Dr

City State Zip Code
Commerce Twp MI 48382-1168

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 338.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825031823244

Amount of Each Receipt this Period

182.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶

560.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 240 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Kimberly A Jones-Schneider		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 1219 Chelsea Blvd		Transaction ID: PR825033523244
	City Oxford	State MI	Zip Code 48371-6729
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 406.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Director	P/R Deduction (\$45.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.00		

B.	Full Name (Last, First, Middle Initial) Mark J Koerner		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 6070 Oak Park Trail		Transaction ID: PR825035023244
	City Haslett	State MI	Zip Code 48840-8983
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 182.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager-Key Account	P/R Deduction (\$13.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.00		

C.	Full Name (Last, First, Middle Initial) Sueanne De Bels-Tomanek		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 2478 Lansbury Dr		Transaction ID: PR825037423244
	City Waterford	State MI	Zip Code 48329-2322
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager	P/R Deduction (\$9.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00		

SUBTOTAL of Receipts This Page (optional)	714.00
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 241 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial) Cynthia Aldrich		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 14239 Cardwell St		Transaction ID: PR825037823244
City Livonia	State MI	Zip Code 48154-4651
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 252.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager Customer Service	P/R Deduction (\$18.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00	

B.

Full Name (Last, First, Middle Initial) Scot W Radcliffe		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 18763 Hilltop Dr		Transaction ID: PR825038823244
City Riverview	State MI	Zip Code 48192-8080
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Inst Devel - Senior	P/R Deduction (\$9.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

C.

Full Name (Last, First, Middle Initial) John G Moreau		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 21800 Frazho Rd		Transaction ID: PR825043523244
City St Clair Shores	State MI	Zip Code 48081-2853
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Analyst - Senior	P/R Deduction (\$9.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

SUBTOTAL of Receipts This Page (optional)	504.00
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 242 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Gail R Molnar

Mailing Address 1771 Sycamore

City State Zip Code
Wyandotte MI 48192-5419

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Process Specialist Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR825044023244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
Valerie A Stanislawski

Mailing Address 11382 Waverly

City State Zip Code
Plymouth MI 48170-4329

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
338.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR825044223244

Amount of Each Receipt this Period
182.00

P/R Deduction (\$13.00 Bi-W-
Weekly)

C.

Full Name (Last, First, Middle Initial)
Mrs. Tracy Y Besant

Mailing Address 22637 Sheridan Rd

City State Zip Code
Novi MI 48375-4461

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR825044623244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

SUBTOTAL of Receipts This Page (optional) ▶ **434.00**

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 243 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Barbara Zieman

Mailing Address 8111 Banner

City State Zip Code
Taylor MI 48180-2164

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Inst Devel - Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	9

Transaction ID: PR825047123244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
Elizabeth A Armbruster

Mailing Address 24892 Eureka

City State Zip Code
Warren MI 48091-4448

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Team Leader II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	9

Transaction ID: PR825047623244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$6.00 Bi-W-
eekly)

C.

Full Name (Last, First, Middle Initial)
Adrienne Savage

Mailing Address 25019 Woodridge Triangle

City State Zip Code
Farmington Hills MI 48335-2053

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	9

Transaction ID: PR825048123244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional) ► **504.00**

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 244 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Elizabeth A Abboud

Mailing Address 26441 Eureka Drive

City Warren State MI Zip Code 48091-1180

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Systems Analyst Adv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR825048423244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$9.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Susan M Crowley

Mailing Address 31 Beacon Hill

City Gross Pointe Farms State MI Zip Code 48236-3001

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR825049723244

Amount of Each Receipt this Period 406.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Patricia A Krcek

Mailing Address 450 Berry Patch Ln.

City White Lk. Twp State MI Zip Code 48386-2003

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR825051423244

Amount of Each Receipt this Period 182.00

P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **714.00**

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 245 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Susan B Epp

Mailing Address 1639 Harold Lane

City State Zip Code
Howell MI 48843-9042

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825054623244
Amount of Each Receipt this Period: 182.00
P/R Deduction (\$9.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Stacey J Sartin

Mailing Address 24771 River Heights St

City State Zip Code
Southfield MI 48033-3169

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825055823244
Amount of Each Receipt this Period: 156.00
P/R Deduction (\$13.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Shlynn T Rhodes

Mailing Address 854 Delray Se

City State Zip Code
Gd Rapids MI 49546-2329

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825059323244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **590.00**

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 246 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Cynthia A Lewis
Mailing Address 14210 Houghton
City Livonia State MI Zip Code 48154-5900
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Consultant - Lean
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 468.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825059623244
Amount of Each Receipt this Period 252.00
P/R Deduction (\$13.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Cynthia A Solak
Mailing Address 37529 Bristol Court
City Livonia State MI Zip Code 48154-1260
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Team Lead Adv
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825061823244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$9.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Peter G Albert
Mailing Address 30711 Delton
City Madison Hts State MI Zip Code 48071-2109
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 468.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825063723244
Amount of Each Receipt this Period 252.00
P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 630.00
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 247 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) William E Hammond		Date of Receipt
	Mailing Address 24480 Mill Stream Lane		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Novi	MI	48375-2946
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Planner - Facility Space	Transaction ID: PR825065523244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="234.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="126.00"/>
		P/R Deduction (\$9.00 Bi-Weekly)	

B.	Full Name (Last, First, Middle Initial) Katherine L Labadie		Date of Receipt
	Mailing Address 40269 Sandy Dr		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Clinton Township	MI	48038-4718
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager	Transaction ID: PR825066723244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="423.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="252.00"/>
		P/R Deduction (\$29.00 Bi-Weekly)	

C.	Full Name (Last, First, Middle Initial) Ray A Warner		Date of Receipt
	Mailing Address 50707 Otter Creek		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Shelby Twp	MI	48317-1751
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Director	Transaction ID: PR825068323244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="754.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="406.00"/>
		P/R Deduction (\$29.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="784.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 248 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Warren E Reetz

Mailing Address 16297 Masonic

City Fraser State MI Zip Code 48026-3623

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Team Leader I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR825069123244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$9.00 Bi-W- weekly)

B. Full Name (Last, First, Middle Initial)
Christian M Meyer

Mailing Address 5441 Maura Drive

City Flushing State MI Zip Code 48433-1057

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR825070823244
 Amount of Each Receipt this Period 140.00
 P/R Deduction (\$13.00 Bi- Weekly)

C. Full Name (Last, First, Middle Initial)
Kelly J Wuetrich

Mailing Address 23255 Liberty St

City Saint Clair Shores State MI Zip Code 48080-1505

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Team Leader I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR825073823244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$9.00 Bi-W- weekly)

SUBTOTAL of Receipts This Page (optional) ► 392.00

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 249 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Michael K Jennings II

Mailing Address 22646 Nottingham Ln

City State Zip Code
Southfield MI 48033-3393

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825074923244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Brenton D Henderson

Mailing Address 1868 Woodmont Ct.

City State Zip Code
Canton MI 48188-1644

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825075323244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Harry I Nowell III

Mailing Address 598 Longfellow Dr

City State Zip Code
Troy MI 48085-4815

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825076723244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **910.00**

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

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

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

FOR LINE NUMBER: PAGE 250 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Patricia A Sherman
Mailing Address 30550 Helmandale Drive
City Franklin State MI Zip Code 48025-1560
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Procurement Administrator
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 234.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825077223244
Amount of Each Receipt this Period 126.00
P/R Deduction (\$9.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
David T Casillas
Mailing Address 3020 Syracuse
City Dearborn State MI Zip Code 48124-4527
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 468.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825077423244
Amount of Each Receipt this Period 252.00
P/R Deduction (\$18.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Dean H Swanson
Mailing Address 86 Webb St
City Troy State MI Zip Code 48098-4632
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 468.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825077923244
Amount of Each Receipt this Period 252.00
P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) **630.00**
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 251 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Brian W Rohrkemper

Mailing Address 30240 Madison Ave

City Warren State MI Zip Code 48093-9005

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Procurement Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR825078123244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$9.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Lablance B Winder

Mailing Address 32001 Concord Dr Apt G

City Madison Hts State MI Zip Code 48071-1231

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR825079423244

Amount of Each Receipt this Period 252.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Yvette N Hendricks

Mailing Address 2653 S Deacon

City Detroit State MI Zip Code 48217-1549

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Analyst - Sr Publishing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR825079623244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **504.00**

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 252 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Cindy S Schroeder

Mailing Address 5295 Sutton Rd

City State Zip Code
Ann Arbor MI 48105-9538

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Security Team Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825080623244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-W- weekly)

B. Full Name (Last, First, Middle Initial)
Duane A Pretzer Jr

Mailing Address 30329 Iroquois

City State Zip Code
Warren MI 48088-5028

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager Enterprise Security

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 428.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825081023244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi- Weekly)

C. Full Name (Last, First, Middle Initial)
Adam R Quesnel

Mailing Address PO Box 293

City State Zip Code
Shepherd MI 48883-0293

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager Enterprise Security

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 423.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825081423244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi- Weekly)

SUBTOTAL of Receipts This Page (optional) ► 630.00

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 253 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Catherine M Sinning
Mailing Address 25232 Surrey Lane
City State Zip Code
Farmington Hills MI 48335-2041
FEC ID number of contributing federal political committee. **C**
Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 754.00
Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825084323244
Amount of Each Receipt this Period: 406.00
P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Andrea L Young
Mailing Address 22405 Hallcroft Trail
City State Zip Code
Southfield MI 48034-5499
FEC ID number of contributing federal political committee. **C**
Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 338.00
Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825084823244
Amount of Each Receipt this Period: 182.00
P/R Deduction (\$13.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Debra A Trezil
Mailing Address 12405 Sunview Ct
City State Zip Code
S Lyon MI 48178-8166
FEC ID number of contributing federal political committee. **C**
Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 754.00
Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825084923244
Amount of Each Receipt this Period: 406.00
P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) **994.00**
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 254 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Wanda Tolbert

Mailing Address 1307 E Larned St
Apt 203

City State Zip Code
Detroit MI 48207-3082

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

Name of Employer Blue Cross Blue Shield of Michigan
Occupation Team Leader I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825085423244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$9.00 Bi-W-weekly)

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

Mailing Address 2025 Fairway

City State Zip Code
Birmingham MI 48009-1869

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

Name of Employer Blue Cross Blue Shield of Michigan
Occupation Hr Sr Service Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825086223244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$9.00 Bi-W-weekly)

C. Full Name (Last, First, Middle Initial)
Tonja M Poole

Mailing Address 636 Watersedge Dr.

City State Zip Code
Ann Arbor MI 48105-2515

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

Name of Employer Blue Cross Blue Shield of Michigan
Occupation Compensation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825086523244

Amount of Each Receipt this Period 252.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 504.00

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 255 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Roy E Nesler

Mailing Address PO Box 871159

City State Zip Code
Canton MI 48187-6159

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825089023244
Amount of Each Receipt this Period: 406.00
P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Kathryn W Woodyard

Mailing Address 5069 Glendurgan Ct

City State Zip Code
Holt MI 48842-9439

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825090123244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$13.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Celeste M Hurst

Mailing Address 901 Sherwin NE

City State Zip Code
Cedar Springs MI 49319-9638

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Sr Consultant - Talent Acq

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825090823244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W-ekly)

SUBTOTAL of Receipts This Page (optional) ▶ **784.00**

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 256 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Karen E Anderson
 Mailing Address 47610 Red Run Dr
 City State Zip Code
 Canton MI 48187-5490
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager
 Receipt For: Primary General Aggregate Year-to-Date 754.00
 Other (specify) ▼
 Date of Receipt 12 / 31 / 2009
Transaction ID: PR825091423244
 Amount of Each Receipt this Period 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Pamela A Braund
 Mailing Address 121E Parent Ave
 City State Zip Code
 Royal Oak MI 48067-3726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Cross Blue Shield of Michigan Occupation Director
 Receipt For: Primary General Aggregate Year-to-Date 754.00
 Other (specify) ▼
 Date of Receipt 12 / 31 / 2009
Transaction ID: PR825092523244
 Amount of Each Receipt this Period 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Lisa J O'Higgins
 Mailing Address 8062 Racine Rd
 City State Zip Code
 Warren MI 48093-2308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager Admin
 Receipt For: Primary General Aggregate Year-to-Date 468.00
 Other (specify) ▼
 Date of Receipt 12 / 31 / 2009
Transaction ID: PR825092623244
 Amount of Each Receipt this Period 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **1064.00**
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 257 / 386

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Dell M Dexter

Mailing Address 10745 Duprey

City State Zip Code
Detroit MI 48224-1296

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 468.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825092823244

Amount of Each Receipt this Period

252.00

P/R Deduction (\$6.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)

Jacqueline M Dannis

Mailing Address 25111 W 13 Mile Rd

City State Zip Code
Franklin MI 48025-2307

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Director Organizational Dev

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 754.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825093123244

Amount of Each Receipt this Period

406.00

P/R Deduction (\$29.00 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Kathleen A Popiela

Mailing Address 36365 Parklane Circle

City State Zip Code
Farmington MI 48335-4210

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 754.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825093923244

Amount of Each Receipt this Period

406.00

P/R Deduction (\$29.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

1064.00

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 258 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Nancy E Bennett

Mailing Address 24121 Rosewood

City State Zip Code
Oak Park MI 48237-2271

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825095923244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Daniel R Daly

Mailing Address 3299 Jasper Ct

City State Zip Code
Troy MI 48083-5780

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825097023244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Cathy Mozham

Mailing Address 20741 Country Oaks

City State Zip Code
Wyandotte MI 48192-7958

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825098223244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 910.00

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

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

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

FOR LINE NUMBER: PAGE 259 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Michelle L Dufort

Mailing Address 8118 Heron Hills Dr

City State Zip Code
Walled Lake MI 48390-1419

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Liaison - Senior Community

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825098423244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-W- weekly)

B. Full Name (Last, First, Middle Initial)
Lloyd L Banks

Mailing Address 5371 Kingsfield Dr

City State Zip Code
W Bloomfield MI 48322-1457

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825098623244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi- Weekly)

C. Full Name (Last, First, Middle Initial)
Carolyn S Williamson

Mailing Address 6450 Oakman Blvd

City State Zip Code
Detroit MI 48228-4024

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825099223244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-W- weekly)

SUBTOTAL of Receipts This Page (optional) ► **504.00**

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 260 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Aaron H MacDonald
Mailing Address 26510 Dundee Rd
City State Zip Code
Huntington Woods MI 48070-1321
FEC ID number of contributing federal political committee. **C**
Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Consultant-Sales
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 234.00
Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825100223244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$6.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Lisa M Hoomaian
Mailing Address 24429 Holyoke Ct
City State Zip Code
Novi MI 48374-2853
FEC ID number of contributing federal political committee. **C**
Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager Sales Infrm
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 468.00
Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825100723244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$13.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Barbara A Mooradian
Mailing Address 2621 Somerset Apt 201
City State Zip Code
Troy MI 48084-4019
FEC ID number of contributing federal political committee. **C**
Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 423.00
Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825101823244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 630.00
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 261 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Diana L Copp

Mailing Address 28532 Perryville Way

City State Zip Code
Farmgtn Hls MI 48331-2551

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Team Leader II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825102423244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-W- weekly)

B. Full Name (Last, First, Middle Initial)
Susan C Tousignant

Mailing Address 21620 River Ridge Trail

City State Zip Code
Farmington Hills MI 48335-4621

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825102523244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi- Weekly)

C. Full Name (Last, First, Middle Initial)
Glenn A Rabac

Mailing Address 2901 West Bloomfield Oaks Court

City State Zip Code
W Blmfld MI 48324-2494

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager Admin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825103123244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$10.00 Bi- Weekly)

SUBTOTAL of Receipts This Page (optional) ► 560.00

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

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

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

FOR LINE NUMBER: PAGE 262 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Robert L Tripi
Mailing Address 16757 Dunswood Dr
City Northville State MI Zip Code 48167-2357
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager Admin
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 468.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825103423244
Amount of Each Receipt this Period 252.00
P/R Deduction (\$13.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Ronda S Ralston
Mailing Address 718 West Dexter Trail
City Mason State MI Zip Code 48854-8606
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager-Sales
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 468.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825104923244
Amount of Each Receipt this Period 252.00
P/R Deduction (\$18.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Gretchen M White
Mailing Address 4165 Dallas
City Holt State MI Zip Code 48842-1735
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager-Sales
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 468.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825105023244
Amount of Each Receipt this Period 252.00
P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 756.00
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 263 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

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

Mailing Address 4797 Burt Avenue

City State Zip Code
Gd Ledge MI 48837-1163

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager-Key Account

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 338.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825105523244

Amount of Each Receipt this Period
182.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Trine J Martinez

Mailing Address 43585 Serenity Dr.

City State Zip Code
Northville MI 48167-8932

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager-Regional Sales

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 468.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825106423244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Arva M Overton

Mailing Address 37404 Legends Trail Dr

City State Zip Code
Farmington Hills MI 48331-1158

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager-Key Account

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 468.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825111223244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶

686.00

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 264 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Barbara A Murphy		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 3404 Park Forest Drive		Transaction ID: PR825111823244
	City W Blmfld	State MI	Zip Code 48324-3233
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 406.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Director - Regional Sales	P/R Deduction (\$5.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.00		

B.	Full Name (Last, First, Middle Initial) Branko Bojicic		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 29223 Glencastle Ct		Transaction ID: PR825111923244
	City Frmqtn Hls	State MI	Zip Code 48336-1416
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager	P/R Deduction (\$13.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00		

C.	Full Name (Last, First, Middle Initial) Michele N Gladany		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 1023 Chestnut Ln		Transaction ID: PR825113423244
	City South Lyon	State MI	Zip Code 48178-1896
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 182.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager	P/R Deduction (\$18.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.00		

SUBTOTAL of Receipts This Page (optional)	714.00
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 265 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Robert E Reynolds

Mailing Address 314 Hillcrest Ave

City State Zip Code
Grs Pt Fms MI 48236-3116

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager-Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825113723244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Marcia E Moore

Mailing Address 49405 Oxley Rd

City State Zip Code
Macomb MI 48044-1520

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager-Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825113923244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$13.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Sharon L Brock

Mailing Address 39542 Dorchester Cir

City State Zip Code
Canton MI 48188-5014

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager-Key Account

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825114223244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 756.00

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 266 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Kimberly M Bickley

Mailing Address 26040 Dow

City State Zip Code
Redford MI 48239-3212

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager-Key Account

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825114323244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$6.00 Bi-W- weekly)

B. Full Name (Last, First, Middle Initial)
Beverly M Lamb-Stovall

Mailing Address 5711 Branford Dr

City State Zip Code
W Bloomfield MI 48322-1123

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director - Regional Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825114423244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi- Weekly)

C. Full Name (Last, First, Middle Initial)
Pamela A Yanis

Mailing Address 905 Blairmoor Ct

City State Zip Code
Grs Pt Wds MI 48236-1244

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825115223244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi- Weekly)

SUBTOTAL of Receipts This Page (optional) ► 938.00

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 267 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Sandra Fester

Mailing Address 11486 Lynhurst Dr

City State Zip Code
Washington MI 48094-3311

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director - Regional Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825116723244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Walter M Dushane

Mailing Address 5521 Rivers Edge Dr

City State Zip Code
Commerce Twp MI 48382-1042

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager-Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825117423244
 Amount of Each Receipt this Period: 91.00
 P/R Deduction (\$13.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Leslie A Martin

Mailing Address 15766 Rosemont

City State Zip Code
Detroit MI 48223-1330

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Consultant - Financial

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825118423244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **623.00**

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 268 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Sharon R Oneill		Date of Receipt
	Mailing Address 7228 Gulley		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Dearbn Hts	MI	48127-3807
	FEC ID number of contributing federal political committee.		Transaction ID: PR825119623244
		Amount of Each Receipt this Period	<input type="text" value="252.00"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager	P/R Deduction (\$18.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="468.00"/>	

B.	Full Name (Last, First, Middle Initial) Kellie S Norton		Date of Receipt
	Mailing Address 5099 Montauk Dr Nw		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Comstk Pk	MI	49321-9353
	FEC ID number of contributing federal political committee.		Transaction ID: PR825122823244
		Amount of Each Receipt this Period	<input type="text" value="140.00"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Director	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	

C.	Full Name (Last, First, Middle Initial) Dennis R Halso		Date of Receipt
	Mailing Address 2531 Forestside CT Se		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Kentwood	MI	49546-7901
	FEC ID number of contributing federal political committee.		Transaction ID: PR825123023244
		Amount of Each Receipt this Period	<input type="text" value="126.00"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Analyst - Senior	P/R Deduction (\$9.00 Bi-W- eekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="234.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="518.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 269 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Gail E Steinhauer		Date of Receipt
	Mailing Address 771 Foxhall Rd		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Blmfld Hls	MI	48304-1916
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Health Care Manager	Transaction ID: PR825129223244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="338.00"/>	
		Amount of Each Receipt this Period <input type="text" value="182.00"/>	
		P/R Deduction (\$13.00 Bi-Weekly)	

B.	Full Name (Last, First, Middle Initial) Margaret T Anthony		Date of Receipt
	Mailing Address 4451 Golfview Dr		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Brighton	MI	48116-9186
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Director	Transaction ID: PR825130223244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1125.00"/>	
		Amount of Each Receipt this Period <input type="text" value="585.00"/>	
		P/R Deduction (\$29.00 Bi-Weekly)	

C.	Full Name (Last, First, Middle Initial) Dolores A Henahan		Date of Receipt
	Mailing Address 211 Orchardview		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Royal Oak	MI	48073-3361
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Sr. Auditor	Transaction ID: PR825131723244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="234.00"/>	
		Amount of Each Receipt this Period <input type="text" value="126.00"/>	
		P/R Deduction (\$9.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="893.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 270 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Rhonda E Thomas

Mailing Address 29232 Sharidale

City State Zip Code
Southfld MI 48034-1007

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
338.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825132223244

Amount of Each Receipt this Period
182.00

P/R Deduction (\$13.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Constance M Blachut

Mailing Address 787 Deer Court

City State Zip Code
Plymouth MI 48170-1743

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825135623244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
William H White

Mailing Address 440 Roland Rd

City State Zip Code
Grosse Pte Farms MI 48236-2848

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

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Application Developer Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825138623244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-Weekly)

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 271 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Charles G Snyder	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 20949 Westfarm Ln	Transaction ID: PR825138923244
	City State Zip Code Northville MI 48167-9042	Amount of Each Receipt this Period 182.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 338.00	P/R Deduction (\$13.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) H. Jay Meier	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 19901 Devonshire Ln	Transaction ID: PR825139023244
	City State Zip Code Macomb MI 48044-5769	Amount of Each Receipt this Period 182.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Health Care Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 338.00	P/R Deduction (\$10.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Robert D Perry	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 10025 Dorian Dr	Transaction ID: PR825139323244
	City State Zip Code Plymouth MI 48170-3629	Amount of Each Receipt this Period 182.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 338.00	P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	546.00
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 272 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Laura J OConnor
Mailing Address 38966 Mt Kisco

City State Zip Code
Sterling Heights MI 48310-3222

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825139623244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Craig B Millard
Mailing Address 1072 Blue Ridge Drive

City State Zip Code
Clarkston MI 48348-4091

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Technology Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825139723244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Susan J Rubin
Mailing Address 41460 Belden Circle

City State Zip Code
Novi MI 48377-1546

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825140223244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 756.00

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 273 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Marea L Boulard		Date of Receipt
	Mailing Address 24440 Tara Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 9
	City	State	Zip Code
	South Lyon	MI	48178-9485
	FEC ID number of contributing federal political committee. C		Transaction ID: PR825140823244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 234.00	<input type="text"/> 126.00
			P/R Deduction (\$13.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Sheela R Manyam		Date of Receipt
	Mailing Address 1051 Maya Ct		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 9
	City	State	Zip Code
	Troy	MI	48085-4967
	FEC ID number of contributing federal political committee. C		Transaction ID: PR825140923244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 338.00	<input type="text"/> 182.00
			P/R Deduction (\$13.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Lorrie A Keilman		Date of Receipt
	Mailing Address 22044 Olmstead		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 9
	City	State	Zip Code
	Dearborn	MI	48124-2754
	FEC ID number of contributing federal political committee. C		Transaction ID: PR825141023244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 234.00	<input type="text"/> 126.00
			P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 434.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 274 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Catherine R Ferrara

Mailing Address 659 Peaceful Court

City Brighton State MI Zip Code 48114-6920

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager Credentialing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825142523244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-W- weekly)

B.

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

Mailing Address 5587 Springwater Lane

City W Blmfld State MI Zip Code 48322-1749

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825143723244
 Amount of Each Receipt this Period: 36.00
 P/R Deduction (\$18.00 Bi- Weekly)

C.

Full Name (Last, First, Middle Initial)
Tamara E Kimbrough

Mailing Address 20505 Southfield

City Detroit State MI Zip Code 48235-2270

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Analyst - Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825144723244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-W- weekly)

SUBTOTAL of Receipts This Page (optional) ► 288.00

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 275 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Dawn M Marvin

Mailing Address 4678 Sheldon Ct

City Hudsonville State MI Zip Code 49426-7810

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager-Account

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR825152023244
 Amount of Each Receipt this Period 182.00
 P/R Deduction (\$6.00 Bi-W- weekly)

B. Full Name (Last, First, Middle Initial)
Jeffrey S Rubleski

Mailing Address 4045 Forest Point Dr

City Muskegon State MI Zip Code 49441-4680

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Director - Regional Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR825152223244
 Amount of Each Receipt this Period 406.00
 P/R Deduction (\$29.00 Bi- Weekly)

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

Mailing Address 118 Adams P.O. Box 706

City Suttons Bay State MI Zip Code 49682-0706

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager-Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR825152723244
 Amount of Each Receipt this Period 182.00
 P/R Deduction (\$18.00 Bi- Weekly)

SUBTOTAL of Receipts This Page (optional) ► **770.00**

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 276 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Michael A Momrik		Date of Receipt
	Mailing Address 15504 Oak Hollow Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 9
	City	State	Zip Code
	Holly	MI	48442-9524
	FEC ID number of contributing federal political committee. C		Transaction ID: PR825153323244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager-Sales	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 468.00	<input type="text"/> 252.00
			P/R Deduction (\$18.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Joan E Bouman		Date of Receipt
	Mailing Address 2988 152nd Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 9
	City	State	Zip Code
	Holland	MI	49424-6160
	FEC ID number of contributing federal political committee. C		Transaction ID: PR825154023244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager-Key Account	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text"/> 140.00
			P/R Deduction (\$9.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Julie L Kik		Date of Receipt
	Mailing Address 226 Deer Run		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 9
	City	State	Zip Code
	Plainwell	MI	49080-9123
	FEC ID number of contributing federal political committee. C		Transaction ID: PR825154123244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager-Key Account	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 234.00	<input type="text"/> 126.00
			P/R Deduction (\$6.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 518.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 277 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Sophia C Quinn

Mailing Address 241 Tuscany Dr

City State Zip Code
Portage MI 49024-9109

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager-Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825154523244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Michelle M VanTorre-Tellier

Mailing Address 2065 Wilshire Dr SE

City State Zip Code
Grand Rapids MI 49506-4013

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager-Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825154823244
 Amount of Each Receipt this Period: 280.00
 P/R Deduction (\$20.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Angenette Reedy

Mailing Address 1669 Barnsley Ct

City State Zip Code
Lowell MI 49331-8677

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Team Leader II Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825155423244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-W-ekly)

SUBTOTAL of Receipts This Page (optional) ► 658.00

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 278 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Catherine A Ferguson		Date of Receipt
	Mailing Address 4336 Ainsworth Rd		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Ionía	MI	48846-9442
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Consultant-Sales	Transaction ID: PR825156523244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="234.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="126.00"/>
		P/R Deduction (\$9.00 Bi-Weekly)	

B.	Full Name (Last, First, Middle Initial) Patricia Langs		Date of Receipt
	Mailing Address 4215 Climbing Way		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Ann Arbor	MI	48103-9402
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Director	Transaction ID: PR825158123244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="260.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="140.00"/>
		P/R Deduction (\$6.00 Bi-Weekly)	

C.	Full Name (Last, First, Middle Initial) David L Marzec		Date of Receipt
	Mailing Address 34576 Hawke Dr		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Strlg Hts	MI	48310-5304
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager	Transaction ID: PR825158623244
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="299.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="161.00"/>
		P/R Deduction (\$13.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="427.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 279 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Monica J Morris

Mailing Address 26803 Berg Rd
Apt 114

City State Zip Code
Southfld MI 48034-2468

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825159123244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$13.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Hope M Anderson

Mailing Address 30640 Balewood St

City State Zip Code
Southfield MI 48076-1569

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Health Care Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825159323244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$13.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Suzanne M Kiester

Mailing Address 11512 Aspen Dr

City State Zip Code
Plymouth MI 48170-4597

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825160023244
 Amount of Each Receipt this Period: 18.00
 P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **382.00**

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 280 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Lisa S Staples

Mailing Address 1330 Woodcliff Dr S E

City State Zip Code
Grand Rapids MI 49506-4245

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Analyst - Senior

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825160423244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$6.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Teresa L Bueche

Mailing Address 7144 Shalimar Dr NE

City State Zip Code
Comstock Park MI 49321-9644

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825161423244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Catherine S Nichols

Mailing Address 2219 Holliday Dr SW

City State Zip Code
Wyoming MI 49519-4238

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825161723244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 714.00

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 281 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Sheryl F Lowe</p> <p>Mailing Address 4899 Peggy St</p> <p>City State Zip Code W Blmfld MI 48322-4446</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Blue Cross Blue Shield of Michigan</p> <p>Occupation Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 580.00</p>	<p>Date of Receipt 12 / 31 / 2009</p> <p>Transaction ID: PR825162923244</p> <p>Amount of Each Receipt this Period 232.00</p> <p>P/R Deduction (\$29.00 Bi-Weekly)</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) Susan L Barkell</p> <p>Mailing Address 8171 Brookville Rd</p> <p>City State Zip Code Plymouth MI 48170-5005</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Blue Cross Blue Shield of Michigan</p> <p>Occupation SVP Health Care Value</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1170.00</p>	<p>Date of Receipt 12 / 31 / 2009</p> <p>Transaction ID: PR825163223244</p> <p>Amount of Each Receipt this Period 630.00</p> <p>P/R Deduction (\$45.00 Bi-Weekly)</p>
---	--

<p>C. Full Name (Last, First, Middle Initial) Adrienne L Bryant</p> <p>Mailing Address 13607 Monte Vista</p> <p>City State Zip Code Detroit MI 48238-2272</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Blue Cross Blue Shield of Michigan</p> <p>Occupation Team Leader I</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 234.00</p>	<p>Date of Receipt 12 / 31 / 2009</p> <p>Transaction ID: PR825165823244</p> <p>Amount of Each Receipt this Period 126.00</p> <p>P/R Deduction (\$9.00 Bi-Weekly)</p>
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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 282 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Denise Turman		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 19532 Bretton Drive		Transaction ID: PR825166523244		
	City Detroit	State MI	Zip Code 48223-1269	Amount of Each Receipt this Period 252.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$18.00 Bi-Weekly)		
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager	Aggregate Year-to-Date 468.00		

B.	Full Name (Last, First, Middle Initial) S G Kipa		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 4774 Avondale Terrace		Transaction ID: PR825168423244		
	City Blmfld Hls	State MI	Zip Code 48304-3602	Amount of Each Receipt this Period 406.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$29.00 Bi-Weekly)		
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Medical Director	Aggregate Year-to-Date 551.00		

C.	Full Name (Last, First, Middle Initial) David C Nicholson		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 5101 Bishop		Transaction ID: PR825169623244		
	City Detroit	State MI	Zip Code 48224-2142	Amount of Each Receipt this Period 117.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$9.00 Bi-W-ekly)		
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Mkt Research Analyst	Aggregate Year-to-Date 225.00		

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 283 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Juanita E Savage	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 25646 Castlereigh Dr	Transaction ID: PR825171723244
	City State Zip Code Farmington Hls MI 48336-1523	Amount of Each Receipt this Period 406.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 754.00	P/R Deduction (\$29.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) George P Gopoiian	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 25437 Witherspoon	Transaction ID: PR825172723244
	City State Zip Code Frmqtn Hls MI 48335-1368	Amount of Each Receipt this Period 406.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Associate Medical Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 754.00	P/R Deduction (\$29.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Asir U Ahmad	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 1935 Hillwood Drive	Transaction ID: PR825173423244
	City State Zip Code Bloomfield Hills MI 48304-2420	Amount of Each Receipt this Period 252.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Physician Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 468.00	P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	▶	1064.00
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 284 / 386
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Diane H Baker

Mailing Address 522 E Marshall

City Ferndale State MI Zip Code 48220-2577

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR825175523244

Amount of Each Receipt this Period 182.00

P/R Deduction (\$13.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Michelle C Fullerton

Mailing Address 23528 Fordson

City Dearborn State MI Zip Code 48124-1602

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR825175623244

Amount of Each Receipt this Period 406.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Dawn E Apley

Mailing Address 28014 Vogt St

City Saint Clair Shores State MI Zip Code 48081-2953

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

Name of Employer Blue Cross Blue Shield of Michigan Occupation Ex Assistant To VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR825177423244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$6.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **714.00**

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 285 / 386

(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Stephen A Airola

Mailing Address 975 Willis Road

City State Zip Code
Saline MI 48176-9218

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Senior Health Care Analyst

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825177523244

Amount of Each Receipt this Period

126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)

Joann M Kochis

Mailing Address 8347 Thorntree Dr.

City State Zip Code
Grosse Ile MI 48138-1515

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 338.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825182123244

Amount of Each Receipt this Period

182.00

P/R Deduction (\$13.00 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Gary W Dusute

Mailing Address 29762 Bayview

City State Zip Code
Grosse Ile MI 48138-1902

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

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 754.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825183923244

Amount of Each Receipt this Period

406.00

P/R Deduction (\$29.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

714.00

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 286 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Glen A Perry

Mailing Address 2148 Michele Dr

City State Zip Code
Troy MI 48085-3825

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825184223244
 Amount of Each Receipt this Period: 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Suzanne M Lauerman

Mailing Address 2140 Roseann Drive

City State Zip Code
Strlg Hts MI 48314-2722

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825184723244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-W-ekly)

C. Full Name (Last, First, Middle Initial)
Renata A Jalosinski

Mailing Address 4815 Hayman Dr

City State Zip Code
Warren MI 48092-2396

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825185023244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **714.00**

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 287 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Michael C Strampel

Mailing Address 13140 Addington Dr

City State Zip Code
Dewitt MI 48820-8186

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Clinical Pharmacist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825186123244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Patricia M Wilson

Mailing Address 597 Dresden Place

City State Zip Code
St Clr Bch ON N8N 4-B6

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825186723244
Amount of Each Receipt this Period: 406.00
P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Jeffrey A Holzhausen

Mailing Address 2675 Ambassador Dr

City State Zip Code
Ypsilanti MI 48198-1028

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825186923244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$18.00 Bi-Weekly)

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 288 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Christopher P Keller		Date of Receipt
	Mailing Address 43258 Mirabile Trl		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Clinton Twp	MI	48038-2451
	FEC ID number of contributing federal political committee. C		Transaction ID: PR825193523244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="234.00"/>	<input type="text" value="126.00"/>
			P/R Deduction (\$9.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Karen A Grojean		Date of Receipt
	Mailing Address 38450 Shana		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Clntn Twp	MI	48036-1882
	FEC ID number of contributing federal political committee. C		Transaction ID: PR825201923244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="247.00"/>	<input type="text" value="91.00"/>
			P/R Deduction (\$13.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Kevin L Kihn		Date of Receipt
	Mailing Address 10529 Stark		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Livonia	MI	48150-2619
	FEC ID number of contributing federal political committee. C		Transaction ID: PR825202023244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="468.00"/>	<input type="text" value="252.00"/>
			P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="469.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 289 / 386
(check only one)

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

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Linda G Givens

Mailing Address 1944 Hyde Park Dr

City State Zip Code
Detroit MI 48207-3820

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Nurse Case Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825202223244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W-weekly)

B.

Full Name (Last, First, Middle Initial)
Catherine M Passmore

Mailing Address 4950 Fox Creek Apt 17

City State Zip Code
Clarkston MI 48346-4911

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Health Care Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825203423244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W-weekly)

C.

Full Name (Last, First, Middle Initial)
Kimberly S Johnson

Mailing Address 6684 Devonshire Dr

City State Zip Code
Canton MI 48187-2613

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

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Health Care Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825205723244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-W-weekly)

SUBTOTAL of Receipts This Page (optional) ► **378.00**

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 290 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Suzette M Felling		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9
	Mailing Address 1966 Hunters Ridge		Transaction ID: PR825209823244
	City Blmfld Hls	State MI	Zip Code 48304-1036
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 90.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager	P/R Deduction (\$18.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.00		

B.	Full Name (Last, First, Middle Initial) Deborah J Tidwell		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9
	Mailing Address 28044 Tavistock Trail		Transaction ID: PR825210923244
	City Southfld	State MI	Zip Code 48034-6252
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager Admin	P/R Deduction (\$9.00 Bi-W- eekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00		

C.	Full Name (Last, First, Middle Initial) Vivian Howard		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9
	Mailing Address 3553 Elizabeth		Transaction ID: PR825211023244
	City Melvindale	State MI	Zip Code 48122-1161
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Ex Assistant To VP	P/R Deduction (\$9.00 Bi-W- eekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00		

SUBTOTAL of Receipts This Page (optional)	▶	342.00
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 291 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Diane K Valade	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 12927 LaSalle Ln	Transaction ID: PR825211423244
	City State Zip Code Huntington Woods MI 48070-1045	Amount of Each Receipt this Period 406.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$29.00 Bi-Weekly)
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.00	

B.	Full Name (Last, First, Middle Initial) Jerry A Johnson	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 22076 Chatsford Circuit	Transaction ID: PR825212123244
	City State Zip Code Southfld MI 48034-2119	Amount of Each Receipt this Period 182.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$13.00 Bi-Weekly)
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Associate Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.00	

C.	Full Name (Last, First, Middle Initial) Amy K Hunter	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 22 Kenberton Dr	Transaction ID: PR825212223244
	City State Zip Code Pleasant Ridge MI 48069-1014	Amount of Each Receipt this Period 280.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Associate Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

SUBTOTAL of Receipts This Page (optional)	868.00
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 292 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Gwendolyn H Parker	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 48165 Liberty Dr	Transaction ID: PR825212423244
	City State Zip Code Shelby Twp MI 48315-4061	Amount of Each Receipt this Period 210.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Associate Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

B.	Full Name (Last, First, Middle Initial) Thomas J Ruane	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 26509 Old Homestead Ct	Transaction ID: PR825212823244
	City State Zip Code Farmington Hills MI 48331-3851	Amount of Each Receipt this Period 406.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$29.00 Bi-Weekly)
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.00	

C.	Full Name (Last, First, Middle Initial) Thelma J Caison-Sorey	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 4253 Sedgemoor Lane	Transaction ID: PR825212923244
	City State Zip Code Bloomfield Hills MI 48302-1648	Amount of Each Receipt this Period 420.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Associate Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

SUBTOTAL of Receipts This Page (optional)	1036.00
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 293 / 386
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Susan P Bayless

Mailing Address 4722 Heather Ln

City State Zip Code
Bloomfld MI 48301-1410

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825213023244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Kerri L Larkin

Mailing Address 21882 Chase Dr

City State Zip Code
Novi MI 48375-4766

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager Admin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825213623244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Carrie S Bryant

Mailing Address 61 Adelaide

City State Zip Code
Detroit MI 48201-1311

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825260423244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **630.00**

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 294 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Melissa A Kwiat
Mailing Address 45015 Lemont
City Canton State MI Zip Code 48187-2985
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Mgr Finance Business Partner
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825260823244
Amount of Each Receipt this Period 182.00
P/R Deduction (\$13.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Marcia N Persin
Mailing Address 5274 Pond Bluff Drive
City W Blmfld State MI Zip Code 48323-2442
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Director
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 754.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825261223244
Amount of Each Receipt this Period 406.00
P/R Deduction (\$29.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Judy B Duckett
Mailing Address 34436 Mayfair Court
City Farmington Hills State MI Zip Code 48331-2147
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825263723244
Amount of Each Receipt this Period 182.00
P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 770.00
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 295 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Karen R Racinski

Mailing Address 21860 Parkwood Ln

City Northville State MI Zip Code 48167-9747

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825264123244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Tracy E Glass

Mailing Address 25455 Ranchwood Dr

City Frmgtn Hls State MI Zip Code 48335-1162

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation Analyst-Rating IV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825264923244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-W-ekly)

C.

Full Name (Last, First, Middle Initial)
Lisa M Crawford

Mailing Address 28736 Stonewall Court

City Novi State MI Zip Code 48377-2720

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager Admin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825265023244
 Amount of Each Receipt this Period: 112.00
 P/R Deduction (\$6.00 Bi-W-ekly)

SUBTOTAL of Receipts This Page (optional) ► 364.00

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 296 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Annette M Masserant		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 1984 Cavalier		Transaction ID: PR825265423244
	City Canton	State MI	Zip Code 48188-1827
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager	P/R Deduction (\$9.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00		

B.	Full Name (Last, First, Middle Initial) Joann D Lechevalier		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 11681 Sycamore		Transaction ID: PR825267623244
	City Plymouth	State MI	Zip Code 48170-4486
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Sr. Auditor	P/R Deduction (\$9.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00		

C.	Full Name (Last, First, Middle Initial) Elaine N Foster		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 10180 Creekwood Circle		Transaction ID: PR825267823244
	City Plymouth	State MI	Zip Code 48170-3824
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Senior Health Care Analyst	P/R Deduction (\$9.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00		

SUBTOTAL of Receipts This Page (optional)	378.00
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 297 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Bethany Bump-White

Mailing Address 31634 Iris Ct

City State Zip Code
Rockwood MI 48173-8766

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825268423244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Robert H Digby

Mailing Address 4125 Naubinway Rd

City State Zip Code
Okemos MI 48864-3424

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Physician Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825268623244
Amount of Each Receipt this Period: 350.00
P/R Deduction (\$10.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Douglas P Johnson

Mailing Address 950 Deerwood Lane

City State Zip Code
Laingsburg MI 48848-8603

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Physician Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825269823244
Amount of Each Receipt this Period: 210.00
P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **812.00**

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 298 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Beth L Rubin

Mailing Address 4408 Westover Drive

City State Zip Code
W Bloomfield MI 48323-2874

FEC ID number of contributing federal political committee. **C**

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Physician Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
754.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR825270423244

Amount of Each Receipt this Period
406.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Noreen T Gurney

Mailing Address 36648 Almond Circle

City State Zip Code
Frmqtn Hls MI 48335-3812

FEC ID number of contributing federal political committee. **C**

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Senior Health Care Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR825270723244

Amount of Each Receipt this Period
112.00

P/R Deduction (\$8.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Emily D Smith Dr

Mailing Address 17292 Adrian Road

City State Zip Code
Southfld MI 48075-1953

FEC ID number of contributing federal political committee. **C**

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Physician Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR825272423244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$6.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **644.00**

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 299 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Kevin L Seitz
Mailing Address 4342 Thoreson
City State Zip Code
Maple City MI 49664-8766
FEC ID number of contributing federal political committee. **C**
Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: EVP Hlth Care Value Enhancemnt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1560.00
Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825273023244
Amount of Each Receipt this Period: 840.00
P/R Deduction (\$60.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Kim E Sorget
Mailing Address 620 Hollywood Ave
City State Zip Code
Grs Pt Wds MI 48236-1319
FEC ID number of contributing federal political committee. **C**
Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: VP Prov Cont & Fac & Anc Pymt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1170.00
Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825273823244
Amount of Each Receipt this Period: 630.00
P/R Deduction (\$45.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Jeanne H Carlson
Mailing Address 30847 Palmer Dr
City State Zip Code
Novi MI 48377-4520
FEC ID number of contributing federal political committee. **C**
Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: SVP Subsidiary Operations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1560.00
Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825274223244
Amount of Each Receipt this Period: 840.00
P/R Deduction (\$60.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 2310.00
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 300 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Michele A Samuels

Mailing Address 29203 Bradmoor Ct

City Farmington Hills State MI Zip Code 48334-3270

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation VP Gnrl Aud & Corp Compli

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR825274423244
 Amount of Each Receipt this Period 1400.00
 P/R Deduction (\$60.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mark R Bartlett

Mailing Address 49546 Hollywood Dr

City Canton State MI Zip Code 48187-1162

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation EVP CFO & Pres Emerg Mkts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR825274623244
 Amount of Each Receipt this Period 840.00
 P/R Deduction (\$60.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Robert W Kasperek

Mailing Address 34796 Bretton

City Livonia State MI Zip Code 48152-4047

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation VP Deputy Gen Cnsl Reg Aff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR825274823244
 Amount of Each Receipt this Period 630.00
 P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 2870.00

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 301 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Michelle L Gaggini
Mailing Address 18515 Country Club Ct.
City Riverview State MI Zip Code 48192-8161
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation VP Federal Business Ops
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1170.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825275523244
Amount of Each Receipt this Period 630.00
P/R Deduction (\$45.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Ira Strumwasser
Mailing Address 5076 Scio Church Rd
City Ann Arbor State MI Zip Code 48103-9636
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation VP BCBSM Foundation
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1170.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825276023244
Amount of Each Receipt this Period 630.00
P/R Deduction (\$45.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
John G Fitzpatrick
Mailing Address 44491 Wright Way
City Novi State MI Zip Code 48375-1549
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation VP Autos
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1125.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825276323244
Amount of Each Receipt this Period 630.00
P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) **1890.00**
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 302 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Allan G O'Dacre

Mailing Address 3420 Andora Dr

City State Zip Code
Superior Twp MI 48198-9659

FEC ID number of contributing federal political committee. **C**

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
VP Medicare Adv Tech Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1035.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825276423244

Amount of Each Receipt this Period
495.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Thomas L Simmer

Mailing Address 4975 S Ridgeside Circle

City State Zip Code
Ann Arbor MI 48105-9447

FEC ID number of contributing federal political committee. **C**

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
SVP & CMO Health Care Value

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1560.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825276523244

Amount of Each Receipt this Period
840.00

P/R Deduction (\$60.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Daniel J Loebb

Mailing Address 1720 Washington Blvd

City State Zip Code
Birmingham MI 48009-1918

FEC ID number of contributing federal political committee. **C**

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1560.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825276623244

Amount of Each Receipt this Period
840.00

P/R Deduction (\$60.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **2175.00**

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 303 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Greg T Vartanoff		Date of Receipt
	Mailing Address 22359 Woodstock Ct		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Woodhaven	MI	48183-3116
	FEC ID number of contributing federal political committee. C		Transaction ID: PR825276823244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 754.00	<input type="text" value="406.00"/>
			P/R Deduction (\$29.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Laura S Marble		Date of Receipt
	Mailing Address 1880 Golf Ridge Dr S		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Bloomfield Townshi	MI	48302-1737
	FEC ID number of contributing federal political committee. C		Transaction ID: PR825276923244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation VP MI Delivery System&Support	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1560.00	<input type="text" value="840.00"/>
			P/R Deduction (\$60.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Alanna D Jackson		Date of Receipt
	Mailing Address 47017 Manhattan Cir		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Novi	MI	48374-1831
	FEC ID number of contributing federal political committee. C		Transaction ID: PR825345423244
Name of Employer Blue Cross Blue Shield of Michigan		Occupation Supervisor	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 234.00	<input type="text" value="126.00"/>
			P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1372.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 304 / 386
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Anika Heideman

Mailing Address 622 Graefield Ct

City Birmingham State MI Zip Code 48009-5843

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager Customer Service

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 396.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR825355223244

Amount of Each Receipt this Period 180.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Tina M Hall

Mailing Address 23600 Edinburgh St

City Southfield State MI Zip Code 48033-2973

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR825358023244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$9.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Traci M Mathews

Mailing Address 19501 Winthrop

City Detroit State MI Zip Code 48235-2078

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR825358323244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **432.00**

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 305 / 386
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Kevin W Holloway

Mailing Address 5915 Cartago Dr

City State Zip Code
Lansing MI 48911-6480

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager Pharmacy Administratio

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825380823244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$9.00 Bi-W- weekly)

B.

Full Name (Last, First, Middle Initial)
Joseph J Andraska

Mailing Address 2220 Tilsby Ct

City State Zip Code
Ann Arbor MI 48103-6160

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Mgr Finance/Accounting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825381823244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$18.00 Bi- Weekly)

C.

Full Name (Last, First, Middle Initial)
Andrew McCallum

Mailing Address 25823 Groveland Ln

City State Zip Code
Novi MI 48374-2353

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Dir Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825383123244
Amount of Each Receipt this Period: 406.00
P/R Deduction (\$29.00 Bi- Weekly)

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 306 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Penny J Wall		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 5214 Wyndemere Cir		Transaction ID: PR825383423244
	City Swartz Creek	State MI	Zip Code 48473-8969
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 140.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Director Finance/PFA	P/R Deduction (\$5.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

B.	Full Name (Last, First, Middle Initial) Wanda P Bowman		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 40616 Kingsley Ln		Transaction ID: PR825383923244
	City Novi	State MI	Zip Code 48377-1633
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 182.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Dir Billing	P/R Deduction (\$6.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.00		

C.	Full Name (Last, First, Middle Initial) Veronica David		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 3037 Portman		Transaction ID: PR825384023244
	City Keego Harbor	State MI	Zip Code 48320-1206
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 182.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager	P/R Deduction (\$13.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.00		

SUBTOTAL of Receipts This Page (optional)	504.00
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 307 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial) Raymond Lewis		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 18026 Strathmoor		Transaction ID: PR825385123244
City Detroit	State MI	Zip Code 48235-2727
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Analyst Instr Dvlpr	P/R Deduction (\$9.00 Bi-W- eekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

B.

Full Name (Last, First, Middle Initial) Matt Forney		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 1086 Ravensview Trl		Transaction ID: PR825385923244
City Milford	State MI	Zip Code 48381-2972
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 252.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation BCN Market Relations Mgr	P/R Deduction (\$18.00 Bi- Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00	

C.

Full Name (Last, First, Middle Initial) Jeanette Johnson		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 29726 Somerset		Transaction ID: PR825386923244
City Southfield	State MI	Zip Code 48076-1871
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 252.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Team Lead Sr	P/R Deduction (\$9.00 Bi-W- eekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00	

SUBTOTAL of Receipts This Page (optional)	630.00
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 308 / 386

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Donald J Werbrouck

Mailing Address 14147 Mandarian Dr

City State Zip Code
Shelby Twp MI 48315-6836

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Procurement Administrator

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 338.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825388623244

Amount of Each Receipt this Period
182.00

P/R Deduction (\$13.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
McArthur Singletary

Mailing Address 25630 W 12 Mile Rd
Apt 103

City State Zip Code
Southfield MI 48034-8022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager Finance & Corp Admin

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825388823244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Ellen P Vergin

Mailing Address 2346 North

City State Zip Code
Milford MI 48380-2235

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Director Finance/PFA

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR825389723244

Amount of Each Receipt this Period
140.00

P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

448.00

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 309 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Michael G Schneider	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 27465 Shagbark Dr	Transaction ID: PR825393023244
	City State Zip Code Southfield MI 48076-7420	Amount of Each Receipt this Period 252.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 306.00	P/R Deduction (\$18.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Matthew C Spindler	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 609 Harriet	Transaction ID: PR825393223244
	City State Zip Code Lansing MI 48917-2744	Amount of Each Receipt this Period 140.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Facility Administrator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	P/R Deduction (\$9.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Steven M Goldberg	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 881 Woodhaven Dr	Transaction ID: PR825393923244
	City State Zip Code Commerce Township MI 48390-5800	Amount of Each Receipt this Period 182.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00	P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	574.00
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 310 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Mark D Casmer
Mailing Address 34235 Cortland Street
City Farmington State MI Zip Code 48335-3511
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 286.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825394523244
Amount of Each Receipt this Period 130.00
P/R Deduction (\$13.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Daniel D Skrzypek
Mailing Address 3424 Bent Trail Dr.
City Ann Arbor State MI Zip Code 48108-9302
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Dir Provider Contracting
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825396123244
Amount of Each Receipt this Period 140.00
P/R Deduction (\$10.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Kathleen E Young
Mailing Address 1217 Naples Court
City Ann Arbor State MI Zip Code 48103-5314
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Dir Med Admin
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825400323244
Amount of Each Receipt this Period 280.00
P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ 550.00
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 311 / 386
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Pamela S Reinert

Mailing Address 661 Plantation Drive

City State Zip Code
Saginaw MI 48603-7162

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Sr Advisor Quality Improvement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825402023244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$13.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Mary A Ellison

Mailing Address 25308 Shiawassee Circle
Unit 109

City State Zip Code
Southfld MI 48034-3826

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager Quality

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825402523244
 Amount of Each Receipt this Period: 252.00
 P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Susan J Sackett

Mailing Address 33025 Lyndon

City State Zip Code
Livonia MI 48154-4174

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Acute Case Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825410223244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **630.00**

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 312 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Brenda A Mccarthy-Rogers

Mailing Address 11104 Addington Dr

City Commerce Township State MI Zip Code 48390-4018

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager Medical Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR825413723244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$13.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Patricia A Palczewski

Mailing Address 28476 Selkirk St

City Southfield State MI Zip Code 48076-3058

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager Medical Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR825413923244

Amount of Each Receipt this Period 252.00

P/R Deduction (\$13.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
William C Granger

Mailing Address 7201 Cuesta Way Drive

City Rockford State MI Zip Code 49341-9495

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation Regional Med Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR825418823244

Amount of Each Receipt this Period 406.00

P/R Deduction (\$29.00)

SUBTOTAL of Receipts This Page (optional) ► **784.00**

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 313 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Hashim M Yar

Mailing Address 572 Tally Ho Court

City State Zip Code
Bloomfield Hills MI 48304-1847

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Regional Med Dir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825418923244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
James E Grzegorzczuk

Mailing Address 4400 James Dr

City State Zip Code
Midland MI 48642-3781

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director Pharmacy Admin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825419423244
 Amount of Each Receipt this Period: 126.00
 P/R Deduction (\$9.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Richard L Cook

Mailing Address 7455 Lime Hollow Se

City State Zip Code
Gd Rapids MI 49546-7436

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager Pharmacy Administratio

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825419523244
 Amount of Each Receipt this Period: 182.00
 P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 490.00

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 314 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Jeanne M Cavanaugh
Mailing Address 521 Leroy St
City Ferndale State MI Zip Code 48220-3300
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager Pharmacy Administratio
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 432.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825419923244
Amount of Each Receipt this Period 216.00
P/R Deduction (\$18.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Janet A Jennings
Mailing Address 8120 E. Jefferson #7d
City Detroit State MI Zip Code 48214-2665
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Dir Medical Informatics
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 754.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825421123244
Amount of Each Receipt this Period 406.00
P/R Deduction (\$29.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Henry W Modglin
Mailing Address 20908 Whitlock
City Farmington Hills State MI Zip Code 48336-5172
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation Proj Mgr Med Informatics
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 338.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825421523244
Amount of Each Receipt this Period 182.00
P/R Deduction (\$6.00 Bi-W-ekely)

SUBTOTAL of Receipts This Page (optional) ► 804.00
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 315 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Nancy S Mamo	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 2560 Birchwood Dr	Transaction ID: PR825421823244
	City State Zip Code Howell MI 48855-7665	Amount of Each Receipt this Period 252.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Mgr Medical Informatics Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 468.00	P/R Deduction (\$18.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Mary V Driessche	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 6026 Meadowlark	Transaction ID: PR825422823244
	City State Zip Code Rockford MI 49341-9221	Amount of Each Receipt this Period 406.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 754.00	P/R Deduction (\$18.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Carla M Chambers	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 39660 Dun Rovin Dr	Transaction ID: PR825426423244
	City State Zip Code Northville MI 48168-4301	Amount of Each Receipt this Period 630.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: VP Hlth & Medical Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 1170.00	P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	1288.00
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 316 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Leslie A James

Mailing Address 528 Woodhaven Dr

City Commerce Township State MI Zip Code 48390-5805

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation Dir Customer Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR825428023244
 Amount of Each Receipt this Period 406.00
 P/R Deduction (\$29.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Tracie D Mayberry

Mailing Address 24387 Knollwood St

City Novi State MI Zip Code 48375-2633

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation Case Manager Health Ctr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR825428723244
 Amount of Each Receipt this Period 126.00
 P/R Deduction (\$9.00 Bi-W-ekly)

C. Full Name (Last, First, Middle Initial)
Yolanda F Smith

Mailing Address 27545 Gateway Dr N Apt 107

City Farmington Hills State MI Zip Code 48334-4935

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager Customer Service

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009
Transaction ID: PR825430823244
 Amount of Each Receipt this Period 252.00
 P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 784.00

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 317 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Dana R Taylor		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 27817 Independence St Apt 2021		Transaction ID: PR825431923244
	City Farmington Hills	State MI	Zip Code 48336-6073
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 252.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager Customer Service	P/R Deduction (\$18.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00		

B.	Full Name (Last, First, Middle Initial) Sharon L Heath		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 28345 Carlton Way Dr		Transaction ID: PR825432123244
	City Novi	State MI	Zip Code 48377-2635
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 406.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Dir Devel & Svc Support	P/R Deduction (\$29.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.00		

C.	Full Name (Last, First, Middle Initial) Adonna M. Mcfall		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address PO Box 3895		Transaction ID: PR825432823244
	City Southfield	State MI	Zip Code 48037-3895
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 252.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager Customer Service	P/R Deduction (\$18.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00		

SUBTOTAL of Receipts This Page (optional)	▶	910.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 318 / 386
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Kathleen C Pierce

Mailing Address 42505 Castle Ct

City State Zip Code
Canton MI 48188-1118

FEC ID number of contributing federal political committee. **C**

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Mgr Prod Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
338.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR825434123244

Amount of Each Receipt this Period
182.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
Nancy L Dewan

Mailing Address 6336 Thurber Rd

City State Zip Code
Bloomfield Hills MI 48301-1525

FEC ID number of contributing federal political committee. **C**

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Dir Bus Devel & Prod Support

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
754.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR825435223244

Amount of Each Receipt this Period
406.00

P/R Deduction (\$29.00 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)
Robert T Hopper

Mailing Address 40671 La Grange Dr

City State Zip Code
Sterling Heights MI 48313-4340

FEC ID number of contributing federal political committee. **C**

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
754.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR825435523244

Amount of Each Receipt this Period
406.00

P/R Deduction (\$29.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional) ► **994.00**

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 319 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Jack N Pitts		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 6194 Forest Grove		Transaction ID: PR825436323244
	City West Bloomfield	State MI	Zip Code 48322-1300
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 252.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Manager	P/R Deduction (\$18.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00		

B.	Full Name (Last, First, Middle Initial) Kelton C Winnega		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 12263 El Camino		Transaction ID: PR825438423244
	City Strlg Hts	State MI	Zip Code 48312-4031
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 182.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation HR Business Partner	P/R Deduction (\$9.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.00		

C.	Full Name (Last, First, Middle Initial) Patricia A Stone		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 3377 Dewdrop Lane		Transaction ID: PR825439123244
	City Howell	State MI	Zip Code 48843-7380
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 406.00
	Name of Employer Blue Cross Blue Shield of Michigan	Occupation Director Admin Svcs Finance	P/R Deduction (\$29.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.00		

SUBTOTAL of Receipts This Page (optional)	▶	840.00
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 320 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Jennifer Bussone

Mailing Address 28121 Forestbrook Dr

City Farmington Hills State MI Zip Code 48334-5210

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation ECV Business Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR825441023244

Amount of Each Receipt this Period 406.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Richard K Gzel

Mailing Address 2887 Walmsley Circle

City Lake Orion State MI Zip Code 48360-1643

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation Director BPI

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR825441123244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$10.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Carmi E Edwards Jr

Mailing Address 5415 Blossom Ln

City Linden State MI Zip Code 48451-8984

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation Portfolio Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR825441223244

Amount of Each Receipt this Period 252.00

P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **784.00**

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 321 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial) Renee E Cords		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 16001 Riverside ST		Transaction ID: PR825441523244
City Livonia	State MI	Zip Code 48154-2460
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 252.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Strategic Anal Prjt Mgr	P/R Deduction (\$18.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00	

B.

Full Name (Last, First, Middle Initial) Lisa M Hardy		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 1705 Brian Ct		Transaction ID: PR825441623244
City Ann Arbor	State MI	Zip Code 48104-4267
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 406.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Dir Bus Planning & Prod Devlp	P/R Deduction (\$29.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.00	

C.

Full Name (Last, First, Middle Initial) Amanda K Martin		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 12340 Sunview Court		Transaction ID: PR825442323244
City South Lyon	State MI	Zip Code 48178-8165
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Lead Systems Analyst	P/R Deduction (\$6.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

SUBTOTAL of Receipts This Page (optional)	▶	784.00
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 322 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial) Sandra J Musich		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 15149 Willowbrook Dr		Transaction ID: PR825442523244
City Plymouth	State MI	Zip Code 48170-2739
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 126.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Analyst Sr Financial	P/R Deduction (\$9.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

B.

Full Name (Last, First, Middle Initial) Catherine A Murphy		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 1911 Bacon Ave		Transaction ID: PR825443523244
City Berkley	State MI	Zip Code 48072-1063
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 406.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Dir Memb & Prov Acctg	P/R Deduction (\$29.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.00	

C.

Full Name (Last, First, Middle Initial) Elizabeth A Geis		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 1392 Ludean		Transaction ID: PR825443623244
City Highland	State MI	Zip Code 48356-1168
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 406.00
Name of Employer Blue Cross Blue Shield of Michigan	Occupation Dir Medicare & Exec Operations	P/R Deduction (\$29.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.00	

SUBTOTAL of Receipts This Page (optional)	938.00
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 323 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Diane L Bridgeman

Mailing Address 687 Chestnut Dr

City State Zip Code
Wixom MI 48393-4304

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Dir Clinical Program Oper

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825443723244
Amount of Each Receipt this Period: 406.00
P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Joseph M Bojman

Mailing Address 15971 Jeanette

City State Zip Code
Southfld MI 48075-2012

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825444723244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Philip D Briskin

Mailing Address 523 Wilcox St

City State Zip Code
Rochester MI 48307-1443

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager Finance Shared Srvcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825449823244
Amount of Each Receipt this Period: 252.00
P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 910.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 324 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Kathryn J Buhrmann

Mailing Address 7746 Coconut Dr

City State Zip Code
Jenison MI 49428-9141

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825452723244
Amount of Each Receipt this Period: 182.00
P/R Deduction (\$13.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Barbara L Benson

Mailing Address 3730 Kinnrow Ct NW

City State Zip Code
Walker MI 49544-1285

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825453423244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$6.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Kristin M Wellman

Mailing Address 1061 Michigan Ave Ste A

City State Zip Code
Muskegon MI 49441-1883

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825453623244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **434.00**

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 325 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Maria Wroblewski

Mailing Address 18420 Huron River Drive

City State Zip Code
New Boston MI 48164-9356

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Claims Systems Coordinator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825454223244
Amount of Each Receipt this Period: 126.00
P/R Deduction (\$9.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Tina M Boortz

Mailing Address 12525 Shery Lane

City State Zip Code
Southgate MI 48195-2326

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: Mgr Finance/Accounting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825454323244
Amount of Each Receipt this Period: 140.00
P/R Deduction (\$10.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Joan M Morehead

Mailing Address 4240 Sebring Ln

City State Zip Code
White Lake MI 48383-1381

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: VP BCN Corp & Fin Svs Admin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825464123244
Amount of Each Receipt this Period: 630.00
P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 896.00

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 326 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Sandra D Boozer

Mailing Address 4562 Apple Tree Court

City State Zip Code
W Blmfld MI 48323-3910

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: VP Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825464223244
 Amount of Each Receipt this Period: 630.00
 P/R Deduction (\$45.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Gail Ross

Mailing Address 322 E Harrison Ave
Unit 26

City State Zip Code
Royal Oak MI 48067-3284

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: VP Customer Service

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825464323244
 Amount of Each Receipt this Period: 630.00
 P/R Deduction (\$45.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Elana S Kozik

Mailing Address 13109 Vernon

City State Zip Code
Hunting Wds MI 48070-1451

FEC ID number of contributing federal political committee. **C**

Name of Employer: Blue Cross Blue Shield of Michigan
Occupation: VP Prod/Proc Improvement

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: PR825464423244
 Amount of Each Receipt this Period: 630.00
 P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 1890.00

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 327 / 386
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Susan A Kluge	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 10795 Stoney Point Dr	Transaction ID: PR825464623244
	City State Zip Code South Lyon MI 48178-9820	Amount of Each Receipt this Period 840.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: SVP & CFO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 1560.00	P/R Deduction (\$60.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Kevin J Klobucar	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 7299 Talonna Trl	Transaction ID: PR825464723244
	City State Zip Code Fowlerville MI 48836-8263	Amount of Each Receipt this Period 630.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: VP BCBSM & PRESIDENT BCN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 1170.00	P/R Deduction (\$45.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Alison D Pollard	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 170 Orchard St	Transaction ID: PR825464823244
	City State Zip Code Chelsea MI 48118-1052	Amount of Each Receipt this Period 630.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Blue Cross Blue Shield of Michigan Occupation: VP Provider Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date: 1170.00	P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	2100.00
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 328 / 386
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Carl E Siebers
Mailing Address 232 Quail Ridge
City Ada State MI Zip Code 49301-8778
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation VP Claims Operations
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1170.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825464923244
Amount of Each Receipt this Period 630.00
P/R Deduction (\$45.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
David R Nelson
Mailing Address 23928 Devonshire Dr
City Novi State MI Zip Code 48374-3758
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation VP and Chief Actuary
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1560.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825465323244
Amount of Each Receipt this Period 840.00
P/R Deduction (\$45.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Marc D Keshishian
Mailing Address 30498 Fox Club Dr
City Farmington Hills State MI Zip Code 48331-1956
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Cross Blue Shield of Michigan Occupation SVP & Chief Medical Officer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1350.00
Date of Receipt 12 / 31 / 2009
Transaction ID: PR825465523244
Amount of Each Receipt this Period 810.00
P/R Deduction (\$60.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) **2280.00**
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 329 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Christopher M Beether

Mailing Address 253 White Pine Trail

City Milford State MI Zip Code 48381-3447

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation Consultant-Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR838626023244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$9.00 Bi-W-ekly)

B.

Full Name (Last, First, Middle Initial)
Tammy Richison

Mailing Address 606 E Greenlawn

City Lansing State MI Zip Code 48910

FEC ID number of contributing federal political committee. **C**

Name of Employer Accident Fund Insurance Company of Ame Occupation Corporate Claims Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR838645823244

Amount of Each Receipt this Period 252.00

P/R Deduction (\$9.00 Bi-W-ekly)

C.

Full Name (Last, First, Middle Initial)
Sion M Hughes

Mailing Address 3889 Carriage Rd

City Bloomfield Hills State MI Zip Code 48301-1903

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation Team Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR838663923244

Amount of Each Receipt this Period 126.00

P/R Deduction (\$9.00 Bi-W-ekly)

SUBTOTAL of Receipts This Page (optional) ▶ **504.00**

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 330 / 386
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Brian T Jones

Mailing Address 1512 East Windemere

City State Zip Code
Royal Oak MI 48073-2856

FEC ID number of contributing federal political committee. **C**

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Team Lead Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR838668123244

Amount of Each Receipt this Period
140.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
Ophelia C Johnson

Mailing Address 21901 Stratford

City State Zip Code
Oak Park MI 48237-2565

FEC ID number of contributing federal political committee. **C**

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Audit Team Leader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR838668923244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

C.

Full Name (Last, First, Middle Initial)
Julie K Maier

Mailing Address 6061 Middle Lake Rd

City State Zip Code
Clarkston MI 48346-2047

FEC ID number of contributing federal political committee. **C**

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
324.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR838681723244

Amount of Each Receipt this Period
216.00

P/R Deduction (\$18.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **482.00**

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 331 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
LaShelle J Wilson

Mailing Address 2079 North Woods Ct

City State Zip Code
Canton MI 48188-6208

FEC ID number of contributing federal political committee. **C**

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Project Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR838735623244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
Nancy Y Koehler

Mailing Address 1804 Peppertree Lane

City State Zip Code
Lansing MI 48912-0000

FEC ID number of contributing federal political committee. **C**

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Ex Assistant To VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR905710423244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

C.

Full Name (Last, First, Middle Initial)
Kathleen M Garman

Mailing Address 1627 Devonwood

City State Zip Code
Rochester Hills MI 48306-3107

FEC ID number of contributing federal political committee. **C**

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
494.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: PR905714723244

Amount of Each Receipt this Period
266.00

P/R Deduction (\$15.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **518.00**

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 332 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Timothy R Barnette

Mailing Address 15433 Markese

City State Zip Code
Allen Park MI 48101-1960

FEC ID number of contributing federal political committee. **C**

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Tech Solutions Architect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR91982723244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$9.00 Bi-W-
eekly)

B.

Full Name (Last, First, Middle Initial)
James P Bobak

Mailing Address 7199 Quail Run St

City State Zip Code
Temperance MI 48182-1363

FEC ID number of contributing federal political committee. **C**

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR919827523244

Amount of Each Receipt this Period
252.00

P/R Deduction (\$18.00 Bi-W-
Weekly)

C.

Full Name (Last, First, Middle Initial)
Peter N Otto

Mailing Address 1673 Columbia Rd.

City State Zip Code
Berkley MI 48072-1975

FEC ID number of contributing federal political committee. **C**

Name of Employer
Blue Cross Blue Shield of Michigan

Occupation
Application Developer Adv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR931669223244

Amount of Each Receipt this Period
126.00

P/R Deduction (\$6.00 Bi-W-
eekly)

SUBTOTAL of Receipts This Page (optional) ► **504.00**

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 333 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
David B Keener

Mailing Address 823 W Oakridge

City Ferndale State MI Zip Code 48220-2753

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR931671123244

Amount of Each Receipt this Period 252.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Daniel N Martin

Mailing Address 1447 W Hazelhurst St

City Ferndale State MI Zip Code 48220-3121

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation Dir Provider Serv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR931671923244

Amount of Each Receipt this Period 406.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Molly J Beyer

Mailing Address 4726 Catalpa Dr SE

City Grand Rapids State MI Zip Code 49546-8632

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Cross Blue Shield of Michigan Occupation Dir Claims Administration

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2009

Transaction ID: PR931672123244

Amount of Each Receipt this Period 140.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **798.00**

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 334 / 386
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Orin M Lewis

Mailing Address 5827 Applewood
Apt 802

City State Zip Code
West Bloomfield MI 48322-3479

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Dir Customer Svcs

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 754.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR931673323244

Amount of Each Receipt this Period
406.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Colleen M Wachowski

Mailing Address 9201 Allen Rd

City State Zip Code
Clarkston MI 48348-2726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Cross Blue Shield of Michigan Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 338.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: PR931674923244

Amount of Each Receipt this Period
182.00

P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

588.00

TOTAL This Period (last page this line number only)

247106.08

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 335 / 386

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Meadows Majority Fund

Mailing Address P.O. Box 4041

City East Lansing State MI Zip Code 48826

Purpose of Disbursement
Contributions to State PACs/Independent Committees

Candidate Name

011
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 30311540
Date of Disbursement

07 / 15 / 2009

Amount of Each Disbursement this Period

500.00

Contributions to State PACs/Independent Committees

B.

Full Name (Last, First, Middle Initial)
Segal for Michigan

Mailing Address 108 Pinehurst Lane

City Battle Creek State MI Zip Code 49015

Purpose of Disbursement
Contributions to State PACs/Independent Committees

Candidate Name

011
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 30314313
Date of Disbursement

07 / 15 / 2009

Amount of Each Disbursement this Period

1000.00

Contributions to State PACs/Independent Committees

C.

Full Name (Last, First, Middle Initial)
Citizens Supporting Mike Nofs for State Senate

Mailing Address 5420 BECKLEY RD PMB 350

City BATTLE CREEK State MI Zip Code 49015

Purpose of Disbursement
Mike Nofs, STATE SENATE 19th MI

Candidate Name
Mike Nofs

011
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: MI District:

Transaction ID: 30314699
Date of Disbursement

07 / 10 / 2009

Amount of Each Disbursement this Period

700.00

Mike Nofs, STATE SENATE 19th MI

SUBTOTAL of Disbursements This Page (optional) ▶

2200.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Dave Bing for Mayor</p> <p>Mailing Address P.O. Box 31-0058</p> <p>City Detroit State MI Zip Code 48231</p> <p>Purpose of Disbursement Dave Bing, Mayor MI</p> <p>Candidate Name Dave Bing</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 30314848 Date of Disbursement 07 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 10000.00</p> <p>011 Category/ Type</p> <p>Dave Bing, Mayor MI</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Andy Neumann</p> <p>Mailing Address Thunder Bay PMB 356</p> <p>City Alpena State MI Zip Code 49707</p> <p>Purpose of Disbursement Andy Neumann, STATE HOUSE 106th MI</p> <p>Candidate Name Representa Andy Neumann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 06</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 30727964 Date of Disbursement 08 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p> <p>Andy Neumann, STATE HOUSE 106th MI</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Rashida Tlaib</p> <p>Mailing Address PO Box 9380</p> <p>City Detroit State MI Zip Code 48209</p> <p>Purpose of Disbursement Rashida Tlaib, STATE HOUSE 12th MI</p> <p>Candidate Name Rashida Tlaib</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 12</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 30727967 Date of Disbursement 09 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 400.00</p> <p>011 Category/ Type</p> <p>Rashida Tlaib, STATE HOUSE 12th MI</p>

SUBTOTAL of Disbursements This Page (optional) ▶

11900.00

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Friends to Elect Dian Slavens <hr/> Mailing Address PO Box 87212 <hr/> City Canton State MI Zip Code 48187 <hr/> Purpose of Disbursement Dian Slavens, STATE HOUSE 21st MI <hr/> Candidate Name Dian Slavens <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 21	Transaction ID: 30727968 Date of Disbursement 09 / 10 / 2009	Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Barb Byrum for State Representative <hr/> Mailing Address P.O. Box 27344 <hr/> City Lansing State MI Zip Code 48909 <hr/> Purpose of Disbursement Barb Byrum, STATE HOUSE 67th MI <hr/> Candidate Name Barb Byrum <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 67	Transaction ID: 30727969 Date of Disbursement 09 / 13 / 2009	Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Friends of John Switalski <hr/> Mailing Address 31705 Forest Lane <hr/> City Warren State MI Zip Code 48093 <hr/> Purpose of Disbursement Jonathon Switalski, STATE HOUSE 25th MI <hr/> Candidate Name Jonathon M Switalski <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 25	Transaction ID: 30727970 Date of Disbursement 09 / 15 / 2009	Amount of Each Disbursement this Period 450.00

SUBTOTAL of Disbursements This Page (optional) ▶

1450.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Melton for Michigan

Mailing Address 2285 Snell Brook

City Auburn Hills State MI Zip Code 48236

Purpose of Disbursement
Contributions to State PACs/Independent Committees

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 30727971
Date of Disbursement

09 / 15 / 2009

Amount of Each Disbursement this Period

1250.00

Contributions to State PACs/Independent Committees

B.

Full Name (Last, First, Middle Initial)
Committee to Elect Shanelle Jackson

Mailing Address 19413 Burton Rd.

City Detroit State MI Zip Code 48219

Purpose of Disbursement
Shanelle Jackson, STATE HOUSE 9th MI

Candidate Name
Shanelle Jackson

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: MI District: 09

Transaction ID: 30727972
Date of Disbursement

09 / 15 / 2009

Amount of Each Disbursement this Period

500.00

Shanelle Jackson, STATE HOUSE 9th MI

C.

Full Name (Last, First, Middle Initial)
Committee to Elect Richard LeBlanc

Mailing Address 36267 Canyon Dr.

City Westland State MI Zip Code 48186

Purpose of Disbursement
Richard LeBlanc, STATE HOUSE 18th MI

Candidate Name
Richard LeBlanc

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: MI District: 18

Transaction ID: 30727973
Date of Disbursement

09 / 16 / 2009

Amount of Each Disbursement this Period

450.00

Richard LeBlanc, STATE HOUSE 18th MI

SUBTOTAL of Disbursements This Page (optional) ▶

2200.00

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Corriveau Leadership Fund</p> <p>Mailing Address PO Box 5251</p> <p>City Northville State MI Zip Code 48167</p> <p>Purpose of Disbursement Contributions to State PACs/Independent Committees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 30727974 Date of Disbursement 09 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contributions to State PACs/Independent Committees</p>
<p>B. Full Name (Last, First, Middle Initial) Supporters of Gary McDowell</p> <p>Mailing Address 10820 Glen St.</p> <p>City Ruyard State MI Zip Code 49780</p> <p>Purpose of Disbursement Gary McDowell, STATE HOUSE 107th MI</p> <p>Candidate Name MI Rep. Gary McDowell</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 30727975 Date of Disbursement 09 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 4000.00</p> <p>Gary McDowell, STATE HOUSE 107th MI</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Mary Valentine</p> <p>Mailing Address P.O. Box 421</p> <p>City Muskegon State MI Zip Code 49441</p> <p>Purpose of Disbursement Mary Valentine, STATE HOUSE 91st MI</p> <p>Candidate Name MI Rep. Mary Valentine</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 91</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 30727976 Date of Disbursement 09 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 600.00</p> <p>Mary Valentine, STATE HOUSE 91st MI</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5600.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Pam Byrnes for State Representative

Mailing Address 17381 N. M-52

City Chelsea State MI Zip Code 48118

Purpose of Disbursement
Pamela Byrnes, STATE HOUSE 52nd MI

Candidate Name
MI Rep. Pamela Byrnes

Office Sought: House
 Senate
 President
State: MI District: 52

Disbursement For: 2009
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: 30727977
Date of Disbursement

09 / 22 / 2009

Amount of Each Disbursement this Period

1000.00

Pamela Byrnes, STATE HOUSE
52nd MI

B. Full Name (Last, First, Middle Initial)
Friends for Vincent Gregory

Mailing Address 29501 Red Leaf Drive

City Southfield State MI Zip Code 48076

Purpose of Disbursement
Vincent Gregory, STATE HOUSE 35th MI

Candidate Name
Vincent Gregory

Office Sought: House
 Senate
 President
State: MI District: 35

Disbursement For: 2009
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: 30727978
Date of Disbursement

09 / 23 / 2009

Amount of Each Disbursement this Period

300.00

Vincent Gregory, STATE HO-
USE 35th MI

C. Full Name (Last, First, Middle Initial)
Committee to Elect Kathy Angerer

Mailing Address P.O. Box 157

City Dundee State MI Zip Code 48131

Purpose of Disbursement
Kathy Angerer, STATE HOUSE 55th MI

Candidate Name
MI Rep. Kathy Angerer

Office Sought: House
 Senate
 President
State: MI District: 55

Disbursement For: 2009
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: 30727979
Date of Disbursement

09 / 23 / 2009

Amount of Each Disbursement this Period

750.00

Kathy Angerer, STATE HOUSE
55th MI

SUBTOTAL of Disbursements This Page (optional) ▶

2050.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Committee to Elect Lamar Lemmons, Jr.</p> <p>Mailing Address 11024 Whittier</p> <p>City Detroit State MI Zip Code 48213</p> <p>Purpose of Disbursement Lamar Lemmons, STATE HOUSE 2nd MI</p> <p>Candidate Name Lamar Lemmons</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 02</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 30727980 Date of Disbursement 09 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 450.00</p> <p>Lamar Lemmons, STATE HOUSE 2nd MI</p>
<p>B. Full Name (Last, First, Middle Initial) Sarah Roberts for State Representative</p> <p>Mailing Address PO Box 643</p> <p>City St Clair Shores State MI Zip Code 48080</p> <p>Purpose of Disbursement Sarah Roberts, STATE HOUSE 24th MI</p> <p>Candidate Name Sarah B Roberts</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 24</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 30727981 Date of Disbursement 10 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Sarah Roberts, STATE HOUSE 24th MI</p>
<p>C. Full Name (Last, First, Middle Initial) Committee to Elect Joel Sheltroun</p> <p>Mailing Address 2225 Gray Rd.</p> <p>City West Branch State MI Zip Code 48661</p> <p>Purpose of Disbursement Joel Sheltroun, STATE HOUSE 103rd MI</p> <p>Candidate Name Joel Sheltroun</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 03</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 30727982 Date of Disbursement 10 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Joel Sheltroun, STATE HOU-SE 103rd MI</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1450.00

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)	PAGE 342 / 386
	<input type="checkbox"/> 21b <input type="checkbox"/> 22 <input type="checkbox"/> 23 <input type="checkbox"/> 24 <input type="checkbox"/> 25 <input type="checkbox"/> 26 <input type="checkbox"/> 27 <input type="checkbox"/> 28a <input type="checkbox"/> 28b <input type="checkbox"/> 28c <input checked="" type="checkbox"/> 29 <input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial) Friends of Andy Neumann	Transaction ID: 30727983 Date of Disbursement 1 0 / 1 3 / 2 0 0 9
Mailing Address Thunder Bay PMB 356	
City State Zip Code Alpena MI 49707	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Andy Neumann, STATE HOUSE 106th MI	011 Category/ Type
Candidate Name Representa Andy Neumann	
Office Sought: <input checked="" type="checkbox"/> House Disbursement For: 2009 <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼	Andy Neumann, STATE HOUSE 106th MI
State: MI District: 06	

B.

Full Name (Last, First, Middle Initial) Jennifer Haase for State Representative	Transaction ID: 30727984 Date of Disbursement 1 0 / 1 6 / 2 0 0 9
Mailing Address 34886 Maplewood Lane	
City State Zip Code Richmond MI 48062	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Jennifer Haase, STATE HOUSE 32nd MI	011 Category/ Type
Candidate Name Jennifer Haase	
Office Sought: <input checked="" type="checkbox"/> House Disbursement For: 2009 <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼	Jennifer Haase, STATE HOU- SE 32nd MI
State: MI District: 32	

C.

Full Name (Last, First, Middle Initial) Friends of Kate Segal	Transaction ID: 30727985 Date of Disbursement 1 0 / 2 0 / 2 0 0 9
Mailing Address 108 Pinehurst Lane	
City State Zip Code Battle Creek MI 49015	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Kate Segal, STATE HOUSE 62nd MI	011 Category/ Type
Candidate Name Kate Segal	
Office Sought: <input checked="" type="checkbox"/> House Disbursement For: 2009 <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼	Kate Segal, STATE HOUSE 62nd MI
State: MI District: 62	

SUBTOTAL of Disbursements This Page (optional)	2500.00
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TOTAL This Period (last page this line number only)	
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Committee to Elect Larry DeShazor <hr/> Mailing Address 3082 Muirfield Drive <hr/> City Portage State MI Zip Code 49024 <hr/> Purpose of Disbursement Larry DeShazor, STATE HOUSE 61st MI Candidate Name Larry DeShazor <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 61 Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 30727987 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Larry DeShazor, STATE HOUSE 61st MI
B. Full Name (Last, First, Middle Initial) Committee to Elect Darwin Booher <hr/> Mailing Address P.O. Box 971 <hr/> City Evart State MI Zip Code 49631 <hr/> Purpose of Disbursement Darwin Booher, STATE HOUSE 102nd MI Candidate Name Darwin Booher <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 02 Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 30727988 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 9
	Amount of Each Disbursement this Period 600.00
	Category/Type 011
	Darwin Booher, STATE HOUSE 102nd MI
C. Full Name (Last, First, Middle Initial) Committee to Elect Gail Haines <hr/> Mailing Address PO Box 301085 <hr/> City Waterford State MI Zip Code 48330 <hr/> Purpose of Disbursement Gail Haines, STATE HOUSE 43rd MI Candidate Name Gail Haines <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 43 Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 30727989 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 300.00
	Category/Type 011
	Gail Haines, STATE HOUSE 43rd MI

SUBTOTAL of Disbursements This Page (optional) ▶

1900.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Cindy Denby for State Rep Comm</p> <p>Mailing Address 9787 Amanda Drive</p> <p>City Fowlerville State MI Zip Code 48836</p> <p>Purpose of Disbursement Cindy Denby, STATE HOUSE 47th MI</p> <p>Candidate Name Cindy Denby</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 47</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 30727990 Date of Disbursement 09 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Cindy Denby, STATE HOUSE 47th MI</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Eileen Kowall</p> <p>Mailing Address 2333 Cumberland Road</p> <p>City White Lake State MI Zip Code</p> <p>Purpose of Disbursement Eileen Kowall, STATE HOUSE 44th MI</p> <p>Candidate Name Eileen Kowall</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 44</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 30727991 Date of Disbursement 10 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>Eileen Kowall, STATE HOUSE 44th MI</p>
<p>C. Full Name (Last, First, Middle Initial) Paul H Scott for State Representative</p> <p>Mailing Address PO Box 193</p> <p>City Grand Blanc State MI Zip Code 48480</p> <p>Purpose of Disbursement Paul Scott, STATE HOUSE 51st MI</p> <p>Candidate Name Paul H Scott</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 51</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 30727992 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 450.00</p> <p>Paul Scott, STATE HOUSE 51st MI</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1750.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Committee to Elect Tim Moore</p> <p>Mailing Address P.O. Box 865</p> <p>City Farwell State MI Zip Code 48622</p> <p>Purpose of Disbursement Tim Moore, STATE HOUSE 97th MI</p> <p>Candidate Name MI Rep. Tim Moore</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 97</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 30727993 Date of Disbursement 10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 750.00</p> <p>011 Category/ Type</p> <p>Tim Moore, STATE HOUSE 97-th MI</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Elect Goeff Hansen</p> <p>Mailing Address P.O. Box 167</p> <p>City Hart State MI Zip Code 49420</p> <p>Purpose of Disbursement Goeff Hansen, STATE HOUSE 100th MI</p> <p>Candidate Name Goeff Hansen</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 00</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 30727994 Date of Disbursement 10 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Goeff Hansen, STATE HOUSE 100th MI</p>
<p>C. Full Name (Last, First, Middle Initial) Committee to Elect Jim Slezak</p> <p>Mailing Address 2246 Oak Shade Drive</p> <p>City Davison State MI Zip Code 48423</p> <p>Purpose of Disbursement Jim Slezak, STATE HOUSE 50th MI</p> <p>Candidate Name Jim Slezak</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 50</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 30727995 Date of Disbursement 08 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>011 Category/ Type</p> <p>Jim Slezak, STATE HOUSE 50th MI</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1550.00

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Deb Cherry Committee	Transaction ID: 30727996 Date of Disbursement 08 / 17 / 2009
	Mailing Address 2124 S. Belsay Rd.	Amount of Each Disbursement this Period 1000.00
	City Burton State MI Zip Code 48519	
	Purpose of Disbursement Deb Cherry, STATE SENATE 26th MI	011 Category/ Type
	Candidate Name Deb Cherry	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District:	Deb Cherry, STATE SENATE 26th MI

B.	Full Name (Last, First, Middle Initial) Ray Basham for Senate	Transaction ID: 30727997 Date of Disbursement 08 / 28 / 2009
	Mailing Address 12406 Telegraph Rd.	Amount of Each Disbursement this Period 600.00
	City Taylor State MI Zip Code 48180	
	Purpose of Disbursement Raymond Basham, STATE SENATE 8th MI	011 Category/ Type
	Candidate Name Raymond Basham	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District:	Raymond Basham, STATE SEN- ATE 8th MI

C.	Full Name (Last, First, Middle Initial) Upper Peninsula Voice	Transaction ID: 30727998 Date of Disbursement 08 / 29 / 2009
	Mailing Address 75 North Shore Drive	Amount of Each Disbursement this Period 400.00
	City Ishpeming State MI Zip Code 49849	
	Purpose of Disbursement Contributions to State PACs/Independent Committees	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Contributions to State PA- Cs/Independent Committees

SUBTOTAL of Disbursements This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Dennis Olshove for State Senate</p> <p>Mailing Address 29723 Roan</p> <p>City Warren State MI Zip Code 49093</p> <p>Purpose of Disbursement Dennis Olshove, STATE SENATE 9th MI</p> <p>Candidate Name Dennis Olshove</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MI District:</p>	<p>Transaction ID: 30727999</p> <p>Date of Disbursement 09 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 600.00</p> <p>011 Category/ Type</p> <p>Dennis Olshove, STATE SEN- ATE 9th MI</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Whitmer for Senate</p> <p>Mailing Address P.O. Box 11063</p> <p>City Lansing State MI Zip Code 48912</p> <p>Purpose of Disbursement Gretchen Whitmer, STATE SENATE 23rd MI</p> <p>Candidate Name MI Sen. Gretchen Whitmer</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MI District:</p>	<p>Transaction ID: 30728000</p> <p>Date of Disbursement 10 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p>011 Category/ Type</p> <p>Gretchen Whitmer, STATE SENATE 23rd MI</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Citizens for Glenn S. Anderson</p> <p>Mailing Address 34300 Park Grove Dr.</p> <p>City Westland State MI Zip Code 48185</p> <p>Purpose of Disbursement Glenn Anderson, STATE HOUSE 18th MI</p> <p>Candidate Name Representa Glenn Anderson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MI District: 18</p>	<p>Transaction ID: 30728001</p> <p>Date of Disbursement 10 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 600.00</p> <p>011 Category/ Type</p> <p>Glenn Anderson, STATE HOU- SE 18th MI</p>

SUBTOTAL of Disbursements This Page (optional)

4200.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) McManus for Senate</p> <p>Mailing Address 7883 E. Alpers</p> <p>City Lake Lelanau State MI Zip Code 49653</p> <p>Purpose of Disbursement Michelle McManus, STATE SENATE 35th MI</p> <p>Candidate Name Michelle McManus</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: MI District:</p>	<p>Transaction ID: 30728002 Date of Disbursement 10 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>Michelle McManus, STATE SENATE 35th MI</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Elect Irma Clark to Senate</p> <p>Mailing Address 2688 Oakman Blvd.</p> <p>City Detroit State MI Zip Code 48238</p> <p>Purpose of Disbursement Irma Clark, STATE SENATE 3rd MI</p> <p>Candidate Name Representa Irma Clark</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: MI District:</p>	<p>Transaction ID: 30728003 Date of Disbursement 10 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 600.00</p> <p>Irma Clark, STATE SENATE 3rd MI</p>
<p>C. Full Name (Last, First, Middle Initial) Rick Jones for State Senate</p> <p>Mailing Address P O BOX 115</p> <p>City Grand Ledge State MI Zip Code 48837</p> <p>Purpose of Disbursement Rick Jones, STATE SENATE 24th MI</p> <p>Candidate Name Rick Jones</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: MI District:</p>	<p>Transaction ID: 30728004 Date of Disbursement 09 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 450.00</p> <p>Rick Jones, STATE SENATE 24th MI</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3050.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Sanborn for Senate	Transaction ID: 30728007 Date of Disbursement 07 / 24 / 2009
	Mailing Address 48945 VanDyke Suite 10A	Amount of Each Disbursement this Period 950.00
	City Shelby Twp. State MI Zip Code 48917	
	Purpose of Disbursement Alan Sanborn, STATE SENATE 12th MI	011 Category/Type
	Candidate Name MI Sen. Alan Sanborn	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District:	Alan Sanborn, STATE SENATE 12th MI

B.	Full Name (Last, First, Middle Initial) Friends of Jason Allen	Transaction ID: 30728008 Date of Disbursement 08 / 03 / 2009
	Mailing Address 415 Munson	Amount of Each Disbursement this Period 1100.00
	City Traverse City State MI Zip Code 49686	
	Purpose of Disbursement Jason Allen, STATE SENATE 36th MI	011 Category/Type
	Candidate Name Representa Jason Allen	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District:	Jason Allen, STATE SENATE 36th MI

C.	Full Name (Last, First, Middle Initial) Randy Richardville for Senate	Transaction ID: 30728010 Date of Disbursement 09 / 18 / 2009
	Mailing Address P.O. Box 1631	Amount of Each Disbursement this Period 1000.00
	City Monroe State MI Zip Code 48161	
	Purpose of Disbursement Randy Richardville, STATE SENATE 17th MI	011 Category/Type
	Candidate Name Randy Richardville	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District:	Randy Richardville, STATE SENATE 17th MI

SUBTOTAL of Disbursements This Page (optional)	3050.00
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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Citizens Supporting Mike Nofs for State Senate</p> <p>Mailing Address 5420 BECKLEY RD PMB 350</p> <p>City BATTLE CREEK State MI Zip Code 49015</p> <p>Purpose of Disbursement Mike Nofs, STATE SENATE 19th MI</p> <p>Candidate Name Mike Nofs</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District:</p>	<p>Transaction ID: 30728011 Date of Disbursement 09 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 9300.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Mike Nofs, STATE SENATE 19th MI</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Stamas for State Senate</p> <p>Mailing Address P.O. Box 153</p> <p>City Midland State MI Zip Code 48640</p> <p>Purpose of Disbursement Tony Stamas, STATE SENATE 36th MI</p> <p>Candidate Name Representa Tony Stamas</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District:</p>	<p>Transaction ID: 30728012 Date of Disbursement 10 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Tony Stamas, STATE SENATE 36th MI</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Friends of Ken Cockrel, Jr.</p> <p>Mailing Address 4815 Avery</p> <p>City Detroit State MI Zip Code 48208</p> <p>Purpose of Disbursement Ken Cockrel, Detroit City Council MI</p> <p>Candidate Name Mr. Ken Cockrel, Jr.</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Transaction ID: 30728013 Date of Disbursement 10 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General2009</p> <p>Ken Cockrel, Detroit City Council MI</p>

SUBTOTAL of Disbursements This Page (optional) ►

14800.00

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Dave Bing for Mayor</p> <p>Mailing Address P.O. Box 31-0058</p> <p>City Detroit State MI Zip Code 48231</p> <p>Purpose of Disbursement Dave Bing, Mayor MI</p> <p>Candidate Name Dave Bing</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General2009</p>	<p>Transaction ID: 30728014 Date of Disbursement 09 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p>011 Category/ Type</p> <p>Dave Bing, Mayor MI</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Brenda Lawrence</p> <p>Mailing Address 29469 Northwestern</p> <p>City Southfield State MI Zip Code 48034</p> <p>Purpose of Disbursement Brenda Lawrence, Mayor MI</p> <p>Candidate Name Brenda Lawrence</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 30728015 Date of Disbursement 08 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Brenda Lawrence, Mayor MI</p>
<p>C. Full Name (Last, First, Middle Initial) ROCC PAC</p> <p>Mailing Address 803 Lexington Blvd.</p> <p>City Royal Oak State MI Zip Code 48073</p> <p>Purpose of Disbursement Contributions to Local Party Committees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 30728016 Date of Disbursement 09 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Contributions to Local Party Committees</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) FicanoPAC Mailing Address P.O. Box 441831 City Detroit State MI Zip Code 48244 Purpose of Disbursement Contributions to Local Party Committees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 30728017 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 9	Amount of Each Disbursement this Period 5000.00 Contributions to Local Party Committees
B.	Full Name (Last, First, Middle Initial) Saunteel Jenkins for City Council Mailing Address 3430 E. Jefferson Ave Box 512 City Detroit State MI Zip Code 48207 Purpose of Disbursement Saunteel Jenkins, Detroit City Council MI Candidate Name Saunteel Jenkins Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2009 Special-General2009	Transaction ID: 30728221 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 9	Amount of Each Disbursement this Period 500.00 Saunteel Jenkins, Detroit City Council MI
C.	Full Name (Last, First, Middle Initial) Friends of Teola P. Hunter Mailing Address 8120 E. Jefferson Suite 2M City Detroit State MI Zip Code 48214 Purpose of Disbursement Teola Hunter, Charter Commission MI Candidate Name Teola P Hunter Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2009 Special-General2009	Transaction ID: 30728222 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 0 / 2 0 0 9	Amount of Each Disbursement this Period 500.00 Teola Hunter, Charter Commission MI

SUBTOTAL of Disbursements This Page (optional)	6000.00
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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Friends of Charles Pugh

Mailing Address PO Box 441035

City Detroit State MI Zip Code 48244

Purpose of Disbursement
Charles Pugh, Detroit City Council MI

Candidate Name
Charles Pugh

Office Sought: House Senate President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Special-General2009

Transaction ID: 30728223

Date of Disbursement

09 / 24 / 2009

Amount of Each Disbursement this Period

4000.00

Charles Pugh, Detroit City Council MI

B.

Full Name (Last, First, Middle Initial)
Committee to Elect Jai-Lee Dearing

Mailing Address

City State Zip Code

Purpose of Disbursement
Jai-Lee Dearing, Detroit City Council MI

Candidate Name
Jai-Lee Dearing

Office Sought: House Senate President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Special-General2009

Transaction ID: 30728224

Date of Disbursement

09 / 29 / 2009

Amount of Each Disbursement this Period

2500.00

Jai-Lee Dearing, Detroit City Council MI

C.

Full Name (Last, First, Middle Initial)
Saunteel Jenkins for City Council

Mailing Address 3430 E. Jefferson Ave
Box 512

City Detroit State MI Zip Code 48207

Purpose of Disbursement
Saunteel Jenkins, Detroit City Council MI

Candidate Name
Saunteel Jenkins

Office Sought: House Senate President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Special-General2009

Transaction ID: 30728225

Date of Disbursement

10 / 06 / 2009

Amount of Each Disbursement this Period

2000.00

Saunteel Jenkins, Detroit City Council MI

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Committee to Elect Gary Brown

Mailing Address 20180 W. Seven Mile Road

City Detroit State MI Zip Code 48219

Purpose of Disbursement
Gary Brown, Detroit City Council MI

Candidate Name
Gary Brown

Office Sought: House Senate President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Special-General2009

Transaction ID: 30728264

Date of Disbursement

10 / 14 / 2009

Amount of Each Disbursement this Period

2500.00

Gary Brown, Detroit City Council MI

B.

Full Name (Last, First, Middle Initial)
Consensus PAC

Mailing Address 916 W. Ottawa Street Apt 4

City Lansing State MI Zip Code 48915

Purpose of Disbursement
Contributions to State PACs/Independent Committees

Candidate Name

Office Sought: House Senate President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 30728295

Date of Disbursement

07 / 24 / 2009

Amount of Each Disbursement this Period

500.00

Contributions to State PACs/Independent Committees

C.

Full Name (Last, First, Middle Initial)
Leadership Under New Direction Fund

Mailing Address 441 Spector Road APT 902

City Lansing State MI Zip Code 48917

Purpose of Disbursement
Contributions to State PACs/Independent Committees

Candidate Name

Office Sought: House Senate President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 30728297

Date of Disbursement

10 / 20 / 2009

Amount of Each Disbursement this Period

500.00

Contributions to State PACs/Independent Committees

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Bruce Caswell for Senate	Transaction ID: 30728298 Date of Disbursement 10 / 20 / 2009
	Mailing Address 8940 E. Bacon Road	Amount of Each Disbursement this Period 400.00
	City Hillsdale State MI Zip Code 49242	
	Purpose of Disbursement Bruce Caswell, STATE SENATE 16th MI	011 Category/ Type
	Candidate Name Bruce Caswell	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Bruce Caswell, STATE SENATE 16th MI
	State: MI District:	

B.	Full Name (Last, First, Middle Initial) Friends of Roger Kahn for Senate	Transaction ID: 30728299 Date of Disbursement 10 / 20 / 2009
	Mailing Address PO Box 1627	Amount of Each Disbursement this Period 1000.00
	City Saginaw State MI Zip Code 48605	
	Purpose of Disbursement Roger Kahn, STATE SENATE 32nd MI	011 Category/ Type
	Candidate Name Roger Kahn	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Roger Kahn, STATE SENATE 32nd MI
	State: MI District:	

C.	Full Name (Last, First, Middle Initial) Hardiman Leadership Fund	Transaction ID: 30728300 Date of Disbursement 08 / 10 / 2009
	Mailing Address 5026 Clear Ridge Drive	Amount of Each Disbursement this Period 250.00
	City Ada State MI Zip Code 49301	
	Purpose of Disbursement Contributions to State PACs/Independent Committees	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contributions to State PACs/Independent Committees
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	1650.00
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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Supporters of Gary McDowell for State Senator</p> <p>Mailing Address 10820 Glen Street</p> <p>City Rubyard State MI Zip Code 49780</p> <p>Purpose of Disbursement Gary McDowell, STATE SENATE 107th MI</p> <p>Candidate Name Gary McDowell</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: MI District:</p>	<p>Transaction ID: 30728301</p> <p>Date of Disbursement 10 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Gary McDowell, STATE SENATE 107th MI</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Re-Elect Brenda Jones to Detroit City Council</p> <p>Mailing Address PO Box 21146</p> <p>City Detroit State MI Zip Code 48221</p> <p>Purpose of Disbursement Brenda Jones, Detroit City Council MI</p> <p>Candidate Name Brenda Jones</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General2009</p> <p>State: District:</p>	<p>Transaction ID: 30728303</p> <p>Date of Disbursement 09 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Brenda Jones, Detroit City Council MI</p>
<p>C. Full Name (Last, First, Middle Initial) Committee to Elect Dan Scripps</p> <p>Mailing Address PO Box 885</p> <p>City Northport State MI Zip Code 49670</p> <p>Purpose of Disbursement Daniel Scripps, STATE HOUSE 101st MI</p> <p>Candidate Name Daniel C Scripps</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: MI District: 01</p>	<p>Transaction ID: 31233656</p> <p>Date of Disbursement 10 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Daniel Scripps, STATE HOUSE 101st MI</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1750.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Douglas A. Geiss for State Representative	Transaction ID: 31233664 Date of Disbursement 10 / 21 / 2009
	Mailing Address 25680 Greenlawn	Amount of Each Disbursement this Period 450.00
	City Taylor State MI Zip Code 48180	
	Purpose of Disbursement Douglas Geiss, STATE HOUSE 22nd MI	011 Category/ Type
	Candidate Name Douglas A Geiss	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 22	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Douglas Geiss, STATE HOUSE 22nd MI

B.	Full Name (Last, First, Middle Initial) Committee to Elect Joel Sheltroun	Transaction ID: 31233973 Date of Disbursement 10 / 21 / 2009
	Mailing Address 2225 Gray Rd.	Amount of Each Disbursement this Period 500.00
	City West Branch State MI Zip Code 48661	
	Purpose of Disbursement Joel Sheltroun, STATE HOUSE 103rd MI	011 Category/ Type
	Candidate Name Joel Sheltroun	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 03	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Joel Sheltroun, STATE HOU- SE 103rd MI

C.	Full Name (Last, First, Middle Initial) Coulouris Leadership Fund	Transaction ID: 31234042 Date of Disbursement 10 / 22 / 2009
	Mailing Address PO Box 2005	Amount of Each Disbursement this Period 1500.00
	City Saginaw State MI Zip Code 48605	
	Purpose of Disbursement Contributions to State PACs	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Contributions to State PA- Cs

SUBTOTAL of Disbursements This Page (optional)	2450.00
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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Friends of Lisa Brown	Transaction ID: 31234048 Date of Disbursement 10 / 22 / 2009
	Mailing Address PO Box 251532	Amount of Each Disbursement this Period 400.00
	City West Bloomfield State MI Zip Code 48325	
	Purpose of Disbursement Lisa Brown, STATE HOUSE 39th MI	011 Category/Type
	Candidate Name Lisa Brown	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 39	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Lisa Brown, STATE HOUSE 39th MI

B.	Full Name (Last, First, Middle Initial) Mark Meadows for State Representative	Transaction ID: 31234053 Date of Disbursement 10 / 24 / 2009
	Mailing Address P.O. Box 4041	Amount of Each Disbursement this Period 1000.00
	City East Lansing State MI Zip Code 48826	
	Purpose of Disbursement Mark Meadows, STATE HOUSE 69th MI	011 Category/Type
	Candidate Name Mark Meadows	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 69	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Mark Meadows, STATE HOUSE 69th MI

C.	Full Name (Last, First, Middle Initial) Committee to Elect Robert B. Jones	Transaction ID: 31234069 Date of Disbursement 10 / 27 / 2009
	Mailing Address P.O. Box 2045	Amount of Each Disbursement this Period 400.00
	City Kalamazoo State MI Zip Code 49003	
	Purpose of Disbursement Robert Jones, STATE HOUSE 60th MI	011 Category/Type
	Candidate Name Robert B Jones	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 60	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Robert Jones, STATE HOUSE 60th MI

SUBTOTAL of Disbursements This Page (optional)	1800.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bob Constan for State Representative</p> <p>Mailing Address 5527 Heather Lane</p> <p>City Dearborn Hts. State MI Zip Code 48125</p> <p>Purpose of Disbursement Bob Constan, STATE HOUSE 16th MI</p> <p>Candidate Name Bob Constan</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 16</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31234074</p> <p>Date of Disbursement 10 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Bob Constan, STATE HOUSE 16th MI</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Spade Leadership Fund</p> <p>Mailing Address PO Box 157</p> <p>City Tipton State MI Zip Code 49287</p> <p>Purpose of Disbursement Contributions to State PACs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31234080</p> <p>Date of Disbursement 11 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Contributions to State PA- Cs</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Friends of Jeff Mayes</p> <p>Mailing Address 4297 Zander Dr.</p> <p>City Bay City State MI Zip Code 48706</p> <p>Purpose of Disbursement Jeff Mayes, STATE HOUSE 96th MI</p> <p>Candidate Name Jeff Mayes</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 96</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31234087</p> <p>Date of Disbursement 11 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Jeff Mayes, STATE HOUSE 96th MI</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Coleman A. Young for Detroit</p> <p>Mailing Address 3430 E. Jefferson</p> <p>City Detroit State MI Zip Code 48207</p> <p>Purpose of Disbursement Coleman Young, STATE HOUSE 4th MI</p> <p>Candidate Name Coleman Young</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MI District: 04</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31234094</p> <p>Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Coleman Young, STATE HOUSE 4th MI</p>
<p>B. Full Name (Last, First, Middle Initial) Elect Vicki Barnett</p> <p>Mailing Address 29271 Glencastle Court</p> <p>City Farmington Hills State MI Zip Code 48336</p> <p>Purpose of Disbursement Vicki Barnett, STATE HOUSE MI</p> <p>Candidate Name Vicki Barnett</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MI District: 00</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31234099</p> <p>Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p> <p>011 Category/ Type</p> <p>Vicki Barnett, STATE HOUSE MI</p>
<p>C. Full Name (Last, First, Middle Initial) Joan Bauer for State Representative</p> <p>Mailing Address 3105 S. Martin Luther King</p> <p>City Lansing State MI Zip Code 48910</p> <p>Purpose of Disbursement Joan Bauer, STATE HOUSE 68th MI</p> <p>Candidate Name Joan Bauer</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MI District: 68</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31234103</p> <p>Date of Disbursement 11 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Joan Bauer, STATE HOUSE 68th MI</p>

SUBTOTAL of Disbursements This Page (optional) ►

1650.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Committee to Elect Andrew J Kandrevas</p> <p>Mailing Address 13400 Dix-Toledo Road</p> <p>City Southgate State MI Zip Code 48195</p> <p>Purpose of Disbursement Andrew Kandrevas, STATE HOUSE 13th MI</p> <p>Candidate Name Andrew J Kandrevas</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 13</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31234112 Date of Disbursement 11 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 450.00</p> <p>Andrew Kandrevas, STATE HOUSE 13th MI</p>
<p>B. Full Name (Last, First, Middle Initial) Team Durhal - Fred Durhal Jr for State Representative</p> <p>Mailing Address 12533 Broadstreet</p> <p>City Detroit State MI Zip Code 48204</p> <p>Purpose of Disbursement Fred Durhal, STATE HOUSE 6th MI</p> <p>Candidate Name Fred Durhal, Jr</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 06</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31234119 Date of Disbursement 11 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Fred Durhal, STATE HOUSE 6th MI</p>
<p>C. Full Name (Last, First, Middle Initial) CTE Woodrow Stanley 34th District State Representative</p> <p>Mailing Address 2211 Brownell Blvd</p> <p>City Flint State MI Zip Code 48504</p> <p>Purpose of Disbursement Woodrow Stanley, STATE HOUSE 34th MI</p> <p>Candidate Name Woodrow Stanley</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 34</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31234126 Date of Disbursement 11 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Woodrow Stanley, STATE HOUSE 34th MI</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1200.00

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Committee to Elect David Nathan <hr/> Mailing Address 18701 Grand River #270 <hr/> City Detroit State MI Zip Code 48223 <hr/> Purpose of Disbursement David Nathan, STATE HOUSE 11th MI Candidate Name David Nathan <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 11 Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31234132 Date of Disbursement 11 / 10 / 2009
	Amount of Each Disbursement this Period 450.00 <hr/> David Nathan, STATE HOUSE 11th MI

B. Full Name (Last, First, Middle Initial) Consensus PAC <hr/> Mailing Address 916 W. Ottawa Street Apt 4 <hr/> City Lansing State MI Zip Code 48915 <hr/> Purpose of Disbursement Contributions to State PACs Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31234137 Date of Disbursement 11 / 11 / 2009
	Amount of Each Disbursement this Period 500.00 <hr/> Contributions to State PACs

C. Full Name (Last, First, Middle Initial) CTE Jimmy Womack for State Rep <hr/> Mailing Address 2310 W. McNichols Road <hr/> City Detroit State MI Zip Code 48221 <hr/> Purpose of Disbursement Jimmy Womack, STATE HOUSE 7th MI Candidate Name Jimmy Womack <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07 Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31234143 Date of Disbursement 12 / 01 / 2009
	Amount of Each Disbursement this Period 1000.00 <hr/> Jimmy Womack, STATE HOUSE 7th MI

SUBTOTAL of Disbursements This Page (optional) ▶	1950.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Committee to Elect Jim Slezak <hr/> Mailing Address 2246 Oak Shade Drive <hr/> City Davison State MI Zip Code 48423 <hr/> Purpose of Disbursement Jim Slezak, STATE HOUSE 50th MI Candidate Name Jim Slezak <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 50 Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31234154 Date of Disbursement 12 / 01 / 2009
	Amount of Each Disbursement this Period 750.00
	Jim Slezak, STATE HOUSE 50th MI
	Category/ Type 011
B. Full Name (Last, First, Middle Initial) Committee to Elect Joel Sheltroun <hr/> Mailing Address 2225 Gray Rd. <hr/> City West Branch State MI Zip Code 48661 <hr/> Purpose of Disbursement Joel Sheltroun, STATE HOUSE 103rd MI Candidate Name Joel Sheltroun <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 03 Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31234160 Date of Disbursement 12 / 02 / 2009
	Amount of Each Disbursement this Period 500.00
	Joel Sheltroun, STATE HOU- SE 103rd MI
	Category/ Type 011
C. Full Name (Last, First, Middle Initial) Committee to Elect Marie Donigan <hr/> Mailing Address 612 Dorchester <hr/> City Royal Oak State MI Zip Code 48067 <hr/> Purpose of Disbursement Marie Donigan, STATE HOUSE 26th MI Candidate Name MI Rep. Marie Donigan <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 26 Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31234165 Date of Disbursement 12 / 02 / 2009
	Amount of Each Disbursement this Period 800.00
	Marie Donigan, STATE HOUSE 26th MI
	Category/ Type 011

SUBTOTAL of Disbursements This Page (optional) ▶

2050.00

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Sarah Roberts for State Representative

Mailing Address PO Box 643

City State Zip Code
St Clair Shores MI 48080

Purpose of Disbursement
Sarah Roberts, STATE HOUSE 24th MI

Candidate Name
Sarah B Roberts

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼

State: MI District: 24

Transaction ID: 31234179
Date of Disbursement

1 2 / 0 6 / 2 0 0 9

Amount of Each Disbursement this Period

150.00

Sarah Roberts, STATE HOUSE
24th MI

B. Full Name (Last, First, Middle Initial)
Committee to Elect Robert B. Jones

Mailing Address P.O. Box 2045

City State Zip Code
Kalamazoo MI 49003

Purpose of Disbursement
Robert Jones, STATE HOUSE 60th MI

Candidate Name
Robert B Jones

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼

State: MI District: 60

Transaction ID: 31234185
Date of Disbursement

1 2 / 0 8 / 2 0 0 9

Amount of Each Disbursement this Period

600.00

Robert Jones, STATE HOUSE
60th MI

C. Full Name (Last, First, Middle Initial)
CTE Harold Haugh State Representative #42

Mailing Address 19464 Candlelight

City State Zip Code
Roseville MI 48066

Purpose of Disbursement
Harold Haugh, STATE HOUSE 42nd MI

Candidate Name
Harold Haugh

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼

State: MI District: 42

Transaction ID: 31234193
Date of Disbursement

1 2 / 0 8 / 2 0 0 9

Amount of Each Disbursement this Period

500.00

Harold Haugh, STATE HOUSE
42nd MI

SUBTOTAL of Disbursements This Page (optional)

1250.00

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Committee to Elect Steve Lindberg</p> <p>Mailing Address P.O. Box 109</p> <p>City Marquette State MI Zip Code 49855</p> <p>Purpose of Disbursement Steve Lindberg, STATE HOUSE 109th MI</p> <p>Candidate Name Steve Lindberg</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 09</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31234200 Date of Disbursement 12 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Steve Lindberg, STATE HOUSE 109th MI</p>
<p>B. Full Name (Last, First, Middle Initial) Mike Huckleberry for State Representative</p> <p>Mailing Address 1738 Vining Road</p> <p>City Greenfield State MI Zip Code 48838</p> <p>Purpose of Disbursement Mike Huckleberry, STATE HOUSE 70th MI</p> <p>Candidate Name Mike Huckleberry</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 70</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31234205 Date of Disbursement 12 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 450.00</p> <p>Mike Huckleberry, STATE HOUSE 70th MI</p>
<p>C. Full Name (Last, First, Middle Initial) Marc Corriveau for State Representative</p> <p>Mailing Address P.O. Box 5251</p> <p>City Northville State MI Zip Code 48167</p> <p>Purpose of Disbursement Marc Corriveau, STATE HOUSE 20th MI</p> <p>Candidate Name MI Rep. Marc Corriveau</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 20</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31234210 Date of Disbursement 12 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Marc Corriveau, STATE HOUSE 20th MI</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2450.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Andy Dillon for State Representative	Transaction ID: 31234218 Date of Disbursement 12 / 09 / 2009
	Mailing Address 25302 W. Warren	Amount of Each Disbursement this Period 2000.00
	City Dearborn Hts. State MI Zip Code 48127	
	Purpose of Disbursement Andy Dillon, STATE HOUSE 76th MI	011 Category/ Type
	Candidate Name Andy Dillon	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 76	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Andy Dillon, STATE HOUSE 76th MI

B.	Full Name (Last, First, Middle Initial) Kate Ebli for State Representative	Transaction ID: 31234223 Date of Disbursement 12 / 10 / 2009
	Mailing Address P.O. Box 2141	Amount of Each Disbursement this Period 600.00
	City Monroe State MI Zip Code 48162	
	Purpose of Disbursement Kate Ebli, STATE HOUSE 56th MI	011 Category/ Type
	Candidate Name MI Rep. Kate Ebli	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 56	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Kate Ebli, STATE HOUSE 56- th MI

C.	Full Name (Last, First, Middle Initial) Dillon Leadership Fund	Transaction ID: 31234228 Date of Disbursement 12 / 16 / 2009
	Mailing Address P.O. Box 16106	Amount of Each Disbursement this Period 2000.00
	City Lansing State MI Zip Code 48901	
	Purpose of Disbursement Contributions to State PACs	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Contributions to State PA- Cs

SUBTOTAL of Disbursements This Page (optional)	4600.00
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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Leadership Under New Direction Fund</p> <p>Mailing Address 441 Spector Road APT 902</p> <p>City Lansing State MI Zip Code 48917</p> <p>Purpose of Disbursement Contributions to State PACs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31234233 Date of Disbursement 12 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Contributions to State PACs</p>
<p>B. Full Name (Last, First, Middle Initial) Hildenbrand Leadership Fund</p> <p>Mailing Address 2700 Timpson Avenue SE</p> <p>City Lowell State MI Zip Code 49331</p> <p>Purpose of Disbursement Contributions to State PACs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31234238 Date of Disbursement 12 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Contributions to State PACs</p>
<p>C. Full Name (Last, First, Middle Initial) Oakland Leadership Fund</p> <p>Mailing Address 1849 Lakeview Lane</p> <p>City Highland State MI Zip Code 48357</p> <p>Purpose of Disbursement Contributions to State PACs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31234243 Date of Disbursement 10 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>Contributions to State PACs</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1300.00

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Friends of Jim Stamas</p> <p>Mailing Address 5915 Eastman Ave Ste 100</p> <p>City Midland State MI Zip Code 48640</p> <p>Purpose of Disbursement James Stamas, STATE HOUSE 98th MI</p> <p>Candidate Name James Nickolas Stamas</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MI District: 98</p>	<p>Transaction ID: 31234254</p> <p>Date of Disbursement 10 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>James Stamas, STATE HOUSE 98th MI</p>
<p>B. Full Name (Last, First, Middle Initial) Forward Michigan</p> <p>Mailing Address 1616 S. Lansing</p> <p>City St. Johns State MI Zip Code 48879</p> <p>Purpose of Disbursement Contributions to State PACs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: 31234260</p> <p>Date of Disbursement 11 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Contributions to State PA- Cs</p>
<p>C. Full Name (Last, First, Middle Initial) Committee to Elect Phillip Pavlov</p> <p>Mailing Address P.O. Box 160</p> <p>City Marysville State MI Zip Code 48040</p> <p>Purpose of Disbursement Phillip Pavlov, STATE HOUSE 81st MI</p> <p>Candidate Name Phillip Pavlov</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MI District: 81</p>	<p>Transaction ID: 31234265</p> <p>Date of Disbursement 11 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 600.00</p> <p>Phillip Pavlov, STATE HOU- SE 81st MI</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1400.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Green Team Majority Fund</p> <p>Mailing Address 4754 Karel Jean Ct. S.W.</p> <p>City Wyoming State MI Zip Code 49519</p> <p>Purpose of Disbursement Contributions to State PACs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31234273</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="475.00"/></p> <p>Contributions to State PACs</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Elect Tim Moore</p> <p>Mailing Address P.O. Box 865</p> <p>City Farwell State MI Zip Code 48622</p> <p>Purpose of Disbursement Tim Moore, STATE HOUSE 97th MI</p> <p>Candidate Name MI Rep. Tim Moore</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MI District: 97</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31234278</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p>Tim Moore, STATE HOUSE 97th MI</p>
<p>C. Full Name (Last, First, Middle Initial) Committee to Elect Jase Bolger</p> <p>Mailing Address PO Box 638</p> <p>City Marshall State MI Zip Code 49068</p> <p>Purpose of Disbursement James Bolger, STATE HOUSE 63rd MI</p> <p>Candidate Name James Bolger</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MI District: 63</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31235651</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p>James Bolger, STATE HOUSE 63rd MI</p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Committee to Elect Peter Lund State Rep Mailing Address 6881 Muirfield City Shelby Twp State MI Zip Code 48316 Purpose of Disbursement Peter Lund, STATE HOUSE 36th MI Candidate Name Peter Lund Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 36 Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31235653 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00 Peter Lund, STATE HOUSE 36th MI

B. Full Name (Last, First, Middle Initial) Citizens for John Walsh Mailing Address 35041 Pembroke City Livonia State MI Zip Code 48152 Purpose of Disbursement John Walsh, STATE HOUSE 19th MI Candidate Name John Walsh Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 19 Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31235654 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00 John Walsh, STATE HOUSE 19th MI

C. Full Name (Last, First, Middle Initial) Committee to Elect Goeff Hansen Mailing Address P.O. Box 167 City Hart State MI Zip Code 49420 Purpose of Disbursement Goeff Hansen, STATE HOUSE 100th MI Candidate Name Goeff Hansen Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 00 Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31235655 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00 Goeff Hansen, STATE HOUSE 100th MI

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Friends to Elect Sharon Tyler Mailing Address 886 Plym Road City Niles State MI Zip Code 49120 Purpose of Disbursement Sharon Tyler, STATE HOUSE 78th MI Candidate Name Sharon Tyler Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 78 Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31235656 Date of Disbursement 12 / 10 / 2009 Amount of Each Disbursement this Period 300.00 Sharon Tyler, STATE HOUSE 78th MI
B.	Full Name (Last, First, Middle Initial) Friends of Kevin Elsenheimer Mailing Address P.O. Box 114 City Bellaire State MI Zip Code 49615 Purpose of Disbursement Kevin Elsenheimer, STATE HOUSE 105th MI Candidate Name Kevin Elsenheimer Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 05 Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31235657 Date of Disbursement 12 / 16 / 2009 Amount of Each Disbursement this Period 1500.00 Kevin Elsenheimer, STATE HOUSE 105th MI
C.	Full Name (Last, First, Middle Initial) Committee to Elect Jase Bolger Mailing Address PO Box 638 City Marshall State MI Zip Code 49068 Purpose of Disbursement James Bolger, STATE HOUSE 63rd MI Candidate Name James Bolger Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 63 Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31235658 Date of Disbursement 12 / 16 / 2009 Amount of Each Disbursement this Period 500.00 James Bolger, STATE HOUSE 63rd MI

SUBTOTAL of Disbursements This Page (optional) ▶

2300.00

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Joe Haveman for State Representative Committee

Mailing Address PO Box 457

City Zeeland State MI Zip Code 49464

Purpose of Disbursement
Joe Haveman, STATE HOUSE 90th MI

Candidate Name
Joe Haveman

011
Category/
Type

Office Sought: House
 Senate
 President
State: MI District: 90

Disbursement For: 2009
 Primary General
 Other (specify) ▼

Transaction ID: 31235659
Date of Disbursement

1 2 / 1 6 / 2 0 0 9

Amount of Each Disbursement this Period

1000.00

Joe Haveman, STATE HOUSE
90th MI

B. Full Name (Last, First, Middle Initial)
Committee to Elect Lesia Liss

Mailing Address 27472 Haverhill Drive

City Warren State MI Zip Code 48092

Purpose of Disbursement
Lesia Liss, STATE HOUSE 28th MI

Candidate Name
Lesia Liss

011
Category/
Type

Office Sought: House
 Senate
 President
State: MI District: 28

Disbursement For: 2009
 Primary General
 Other (specify) ▼

Transaction ID: 31235660
Date of Disbursement

1 0 / 2 8 / 2 0 0 9

Amount of Each Disbursement this Period

500.00

Lesia Liss, STATE HOUSE
28th MI

C. Full Name (Last, First, Middle Initial)
Committee to Elect Virgil Smith State Senator

Mailing Address 20445 Sheffield

City Detroit State MI Zip Code 48221

Purpose of Disbursement
Virgil Smith, STATE SENATE 4th MI

Candidate Name
Virgil Smith

011
Category/
Type

Office Sought: House
 Senate
 President
State: MI District:

Disbursement For: 2009
 Primary General
 Other (specify) ▼

Transaction ID: 31235661
Date of Disbursement

1 0 / 2 1 / 2 0 0 9

Amount of Each Disbursement this Period

2500.00

Virgil Smith, STATE SENATE
4th MI

SUBTOTAL of Disbursements This Page (optional)

4000.00

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Tupac Hunter for State Senate

Mailing Address 24461 Pembroke Ave.

City State Zip Code
Detroit MI 48219

Purpose of Disbursement
Tupac Hunter, STATE SENATE 5th MI

Candidate Name
Tupac Hunter

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: MI District:

Transaction ID: 31235662

Date of Disbursement

10 / 21 / 2009

Amount of Each Disbursement this Period

600.00

Tupac Hunter, STATE SENATE
5th MI

B.

Full Name (Last, First, Middle Initial)
Upper Peninsula Voice

Mailing Address 75 North Shore Drive

City State Zip Code
Ishpeming MI 49849

Purpose of Disbursement
Contributions to State PACs

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 31235665

Date of Disbursement

12 / 02 / 2009

Amount of Each Disbursement this Period

1000.00

Contributions to State PA-
Cs

C.

Full Name (Last, First, Middle Initial)
Friends to Elect Martha Scott

Mailing Address 75 Rhode Island

City State Zip Code
Highland Park MI 48203

Purpose of Disbursement
Martha Scott, STATE SENATE 2nd MI

Candidate Name
MI Sen. Martha Scott

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: MI District:

Transaction ID: 31235666

Date of Disbursement

12 / 08 / 2009

Amount of Each Disbursement this Period

400.00

Martha Scott, STATE SENATE
2nd MI

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Whitmer for Senate</p> <p>Mailing Address P.O. Box 11063</p> <p>City Lansing State MI Zip Code 48912</p> <p>Purpose of Disbursement Gretchen Whitmer, STATE SENATE 23rd MI</p> <p>Candidate Name MI Sen. Gretchen Whitmer</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31235667 Date of Disbursement 12 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p> <p>Gretchen Whitmer, STATE SENATE 23rd MI</p>
<p>B. Full Name (Last, First, Middle Initial) Citizens for Glenn S. Anderson</p> <p>Mailing Address 34300 Park Grove Dr.</p> <p>City Westland State MI Zip Code 48185</p> <p>Purpose of Disbursement Glenn Anderson, STATE HOUSE 18th MI</p> <p>Candidate Name Representa Glenn Anderson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 18</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31235668 Date of Disbursement 12 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 400.00</p> <p>011 Category/ Type</p> <p>Glenn Anderson, STATE HOUSE 18th MI</p>
<p>C. Full Name (Last, First, Middle Initial) John Proos for State Senate</p> <p>Mailing Address PO Box 271</p> <p>City St. Joseph State MI Zip Code 49085</p> <p>Purpose of Disbursement John Proos, STATE SENATE 21st MI</p> <p>Candidate Name John M Proos</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31235669 Date of Disbursement 12 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 600.00</p> <p>011 Category/ Type</p> <p>John Proos, STATE SENATE 21st MI</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) John Moolenaar for State Senate</p> <p>Mailing Address 5915 Eastman Ave Ste 100</p> <p>City Midland State MI Zip Code 48640</p> <p>Purpose of Disbursement John Moolenaar, STATE SENATE 36th MI</p> <p>Candidate Name John R Moolenaar</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31235670 Date of Disbursement 12 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>John Moolenaar, STATE SEN- ATE 36th MI</p>
<p>B. Full Name (Last, First, Middle Initial) Joe Hune for State Senate</p> <p>Mailing Address 4849 Hogback Rd</p> <p>City Fowlerville State MI Zip Code 48836</p> <p>Purpose of Disbursement Joe Hune, STATE SENATE 22nd MI</p> <p>Candidate Name Joe Hune</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31235671 Date of Disbursement 12 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>Joe Hune, STATE SENATE 22- nd MI</p>
<p>C. Full Name (Last, First, Middle Initial) Alan Cropsey for State Senate</p> <p>Mailing Address P.O. Box 445</p> <p>City DeWitt State MI Zip Code 48820</p> <p>Purpose of Disbursement Alan Cropsey, STATE SENATE 33rd MI</p> <p>Candidate Name Alan Cropsey</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31235672 Date of Disbursement 12 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Alan Cropsey, STATE SENATE 33rd MI</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6500.00

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Committee to Elect Andre L Spivey <hr/> Mailing Address PO Box 32988 <hr/> City Detroit State MI Zip Code 48232 <hr/> Purpose of Disbursement Andre Spivey, Detroit City Council MI Candidate Name Andre L Spivey <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Detroit City Council 	Transaction ID: 31236002 Date of Disbursement 10 / 22 / 2009 <hr/> Amount of Each Disbursement this Period 2500.00 <hr/> Andre Spivey, Detroit City Council MI	
	B. Full Name (Last, First, Middle Initial) Friends of Kwame Kenyatta <hr/> Mailing Address 1491 Sheridian <hr/> City Detroit State MI Zip Code 48214 <hr/> Purpose of Disbursement Kwame Kenyatta, Detroit City Council MI Candidate Name Kwame Kenyatta <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Detroit City Council 	Transaction ID: 31236005 Date of Disbursement 11 / 03 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00 <hr/> Kwame Kenyatta, Detroit City Council MI
	C. Full Name (Last, First, Middle Initial) Brenda Jones for City Council <hr/> Mailing Address 2441 West Grand Blvd Suite 208 <hr/> City Detroit State MI Zip Code 48206 <hr/> Purpose of Disbursement Brenda Jones, Detroit City Council MI Candidate Name Brenda Jones <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Detroit City Council 	Transaction ID: 31236007 Date of Disbursement 11 / 03 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00 <hr/> Brenda Jones, Detroit City Council MI

SUBTOTAL of Disbursements This Page (optional)	4500.00
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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Mike Bouchard for Governor Mailing Address PO Box 1433 City Royal Oak State MI Zip Code 48068 Purpose of Disbursement Michael Bouchard, Governor MI Candidate Name Michael J Bouchard Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 31236011 Date of Disbursement 12 / 16 / 2009	Amount of Each Disbursement this Period 10000.00 Michael Bouchard, Governor MI
B.	Full Name (Last, First, Middle Initial) Hoekstra For Governor Mailing Address PO Box 1287 City Holland State MI Zip Code 49422 Purpose of Disbursement Peter Hoekstra, Governor MI Candidate Name Peter Hoekstra Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 31236013 Date of Disbursement 12 / 18 / 2009	Amount of Each Disbursement this Period 10000.00 Peter Hoekstra, Governor MI
C.	Full Name (Last, First, Middle Initial) Rebekah Warren Envision Michigan PAC Mailing Address 234 8th Street City Ann Arbor State MI Zip Code 48103 Purpose of Disbursement Contributions to State PACs Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 31236015 Date of Disbursement 12 / 09 / 2009	Amount of Each Disbursement this Period 500.00 Contributions to State PACs

SUBTOTAL of Disbursements This Page (optional) ▶

20500.00

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Stamas Leadership PAC <hr/> Mailing Address 1731 Blue Grass Road <hr/> City Lansing State MI Zip Code 48906 <hr/> Purpose of Disbursement Contributions to State PACs Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31236017 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 6 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Contributions to State PACs
	Category/Type 011
B. Full Name (Last, First, Middle Initial) Bolger Restore Michigan Fund <hr/> Mailing Address 409 Smith <hr/> City Lansing State MI Zip Code 48910 <hr/> Purpose of Disbursement Contributions to State PACs Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31236020 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 6 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Contributions to State PACs
	Category/Type 011
C. Full Name (Last, First, Middle Initial) Larry DeShazor Leadership Fund <hr/> Mailing Address 201 Townsend Street Ste 900 <hr/> City Lansing State MI Zip Code 48933 <hr/> Purpose of Disbursement Contributions to State PACs Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31236022 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 350.00
	Contributions to State PACs
	Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Hammel Leadership Fund

Mailing Address PO BOX 12073

City State Zip Code
Lansing MI 48901

Purpose of Disbursement
Contributions to State PACs

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 31267598

Date of Disbursement

12 / 02 / 2009

Amount of Each Disbursement this Period

1000.00

Contributions to State PA-
Cs

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

160775.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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 Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)
Laurie Ann Mcintee

Mailing Address 3356 S. Blvd., E.

City State Zip Code
Blmfld Hls MI 48304-1155

Purpose of Disbursement
Refund on Contribution from Individual

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 30727542

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund on Contribution from Individual

SUBTOTAL of Disbursements This Page (optional) ►

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

<p>A. Full Name (Last, First, Middle Initial) Stupak for Congress</p> <p>Mailing Address 817 9th Ave</p> <p>City Menominee State MI Zip Code 49858</p> <p>Purpose of Disbursement Contribution to Federal Candidates</p> <p>Candidate Name Bart Stupak</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 30727546 Date of Disbursement 07 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>Contribution to Federal Candidates</p>
<p>B. Full Name (Last, First, Middle Initial) Bart's Bridge PAC</p> <p>Mailing Address 817 Ninth Ave</p> <p>City Menominee State MI Zip Code 49858</p> <p>Purpose of Disbursement Contributions to Federal PACs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 30727547 Date of Disbursement 08 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>Contributions to Federal PACs</p>
<p>C. Full Name (Last, First, Middle Initial) Wolverine PAC</p> <p>Mailing Address 607 14th Street NW Ste 800</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Contributions to Federal PACs</p> <p>Candidate Name Wolverine PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 30727548 Date of Disbursement 09 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Contributions to Federal PACs</p>

SUBTOTAL of Disbursements This Page (optional) ▶

9500.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) John D Dingell For Congress Committee <hr/> Mailing Address 607 Fourteenth Street Nw <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Contribution to Federal Candidates Candidate Name Rep. John Dingell <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 16 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 30727550 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 2500.00
	Contribution to Federal Candidates
	Category/ Type 011
B. Full Name (Last, First, Middle Initial) Rogers For Congress <hr/> Mailing Address Post Office Box 581 Post Office Box 581 <hr/> City Brighton State MI Zip Code 48116 <hr/> Purpose of Disbursement Contribution to Federal Candidates Candidate Name Rep. Michael Rogers <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 08 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 30727552 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 2000.00
	Contribution to Federal Candidates
	Category/ Type 011
C. Full Name (Last, First, Middle Initial) Dave Camp For Congress <hr/> Mailing Address 5915 Eastman Ave. Suite 100 5915 Eastman Ave. Suite 100 <hr/> City Midland State MI Zip Code 48640 <hr/> Purpose of Disbursement Contribution to Federal Candidates Candidate Name Rep. Dave Camp <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 30727553 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Contribution to Federal Candidates
	Category/ Type 011

SUBTOTAL of Disbursements This Page (optional) ▶

5500.00

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
McCotter Congressional Committee

Mailing Address P. O. Box 530788

City Livonia State MI Zip Code 48153

Purpose of Disbursement
Contribution to Federal Candidates

Candidate Name
Rep. Thaddeus McCotter

Office Sought: House
 Senate
 President

State: MI District: 11

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: 30727949

Date of Disbursement

09 / 16 / 2009

Amount of Each Disbursement this Period

1000.00

011
Category/
Type

Contribution to Federal
Candidates

B. Full Name (Last, First, Middle Initial)
Rogers For Congress

Mailing Address Post Office Box 581
Post Office Box 581

City Brighton State MI Zip Code 48116

Purpose of Disbursement
Contribution to Federal Candidates

Candidate Name
Rep. Michael Rogers

Office Sought: House
 Senate
 President

State: MI District: 08

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: 30727950

Date of Disbursement

09 / 17 / 2009

Amount of Each Disbursement this Period

1000.00

011
Category/
Type

Contribution to Federal
Candidates

C. Full Name (Last, First, Middle Initial)
Candice Miller for Congress

Mailing Address P.O. Box 791

City Mt. Clemens State MI Zip Code 48046

Purpose of Disbursement
Contribution to Federal Candidates

Candidate Name
Candice Miller

Office Sought: House
 Senate
 President

State: MI District: 00

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: 30727951

Date of Disbursement

09 / 30 / 2009

Amount of Each Disbursement this Period

2000.00

011
Category/
Type

Contribution to Federal
Candidates

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A.	Full Name (Last, First, Middle Initial) Michigan Republican Party - Fedral Acct.	Transaction ID: 30727952 Date of Disbursement
	Mailing Address 520 Seymour St.	<input type="text" value="10"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Lansing State MI Zip Code 48933	Amount of Each Disbursement this Period
	Purpose of Disbursement Contributions to Federal PACs	<input type="text" value="5000.00"/>
	Candidate Name	Category/Type <input type="text" value="011"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Contributions to Federal PACs

B.	Full Name (Last, First, Middle Initial) Dave Camp For Congress	Transaction ID: 30727953 Date of Disbursement
	Mailing Address 5915 Eastman Ave. Suite 100 5915 Eastman Ave. Suite 100	<input type="text" value="10"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Midland State MI Zip Code 48640	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Federal Candidates	<input type="text" value="500.00"/>
	Candidate Name Rep. Dave Camp	Category/Type <input type="text" value="011"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Contribution to Federal Candidates

C.	Full Name (Last, First, Middle Initial) National Republican Congressional Committee	Transaction ID: 30727954 Date of Disbursement
	Mailing Address 320 First St. SE	<input type="text" value="09"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Contributions to Federal PACs	<input type="text" value="2500.00"/>
	Candidate Name	Category/Type <input type="text" value="011"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Contributions to Federal PACs

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="8000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
McCotter Congressional Committee

Mailing Address P. O. Box 530788

City Livonia State MI Zip Code 48153

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name
Rep. Thaddeus McCotter

Office Sought: House
 Senate
 President

State: MI District: 11

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: 31233474

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Contributions to Federal Candidates

B. Full Name (Last, First, Middle Initial)
McCotter Congressional Committee

Mailing Address P. O. Box 530788

City Livonia State MI Zip Code 48153

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name
Rep. Thaddeus McCotter

Office Sought: House
 Senate
 President

State: MI District: 11

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: 31233483

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Contributions to Federal Candidates

C. Full Name (Last, First, Middle Initial)
DAN10

Mailing Address 1088 Bishop Street
Suite 1009

City Honolulu State HI Zip Code 96813

Purpose of Disbursement
Contributions to Federal Candidates

Candidate Name
Dan Inouye

Office Sought: House
 Senate
 President

State: HI District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: 31235998

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Contributions to Federal Candidates

SUBTOTAL of Disbursements This Page (optional) ►

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) DAN10 <hr/> Mailing Address 1088 Bishop Street Suite 1009 <hr/> City Honolulu State HI Zip Code 96813 <hr/> Purpose of Disbursement Contributions to Federal Candidates Candidate Name Dan Inouye <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31236000 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00 <hr/> Contributions to Federal Candidates
B. Full Name (Last, First, Middle Initial) Rogers For Congress <hr/> Mailing Address Post Office Box 581 Post Office Box 581 <hr/> City Brighton State MI Zip Code 48116 <hr/> Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Michael Rogers <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 08 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31267599 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 6 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00 <hr/> Contributions to Federal Candidates

SUBTOTAL of Disbursements This Page (optional) ►

1500.00

TOTAL This Period (last page this line number only) ►

32500.00