

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 Robin Stone


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

| L | $\begin{aligned} & \text { Office } \\ & \text { Use } \\ & \text { Only } \end{aligned}$ |  |  |  |  |  |  |  | FEC FORM 3X <br> Rev. 12/2004 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |

FEC Form 3X (Rev. 02/2003)
Write or Type Committee Name
Blue Cross Blue Shield of Alabama PAC

6. (a) Cash on Hand January 1,
Y-Y
2016
(b) Cash on Hand at

Beginning of Reporting Period. $\qquad$

(c) Total Receipts (from Line 19) $\qquad$

$\square \quad 41233.56$
(d) Subtotal (add Lines 6(b) and

6(c) for Column A and Lines
6(a) and 6(c) for Column B) $\qquad$

7. Total Disbursements (from Line 31) $\qquad$




9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D) $\qquad$
$0,0.00$
10. Debts and Obligations Owed BY the Committee (Itemize all on
Schedule C and/or Schedule D) $\qquad$
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

## Write or Type Committee Name

Blue Cross Blue Shield of Alabama PAC

11. Contributions (other than loans) From:
(a) Individuals/Persons Other

Than Political Committees
(i) Itemized (use Schedule A)............


|  | 34408.86 |
| :---: | :---: |
|  | 6824.70 |
|  | ,$\quad 41233.56$ |
|  | 0.00 |
|  | 0.00 |

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) $\qquad$

0.00

|  | 0.00 |
| :---: | :---: |
|  | 0.00 |

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees. $\qquad$ ....
17. Other Federal Receipts
(Dividends, Interest, etc.) $\qquad$
18. Transfers from Non-Federal and Levin Funds


| 0,00 |  |
| :---: | :---: |
|  | 0.00 |

(a) Non-Federal Account
(from Schedule H3)...........................
(b) Levin Funds (from Schedule H5) .........
(c) Total Transfers (add 18(a) and 18(b))..

|  | 0.00 |
| :---: | :---: |
|  | 0.00 |
|  | 0.00 |

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ......... $\square$
$\square 1233.56$
20. Total Federal Receipts
(subtract Line 18(c) from Line 19) ......... $\downarrow$ $\square$
$\square 41233.56$

FEC Form 3X (Rev. 02/2003)

## II. Disbursements

21. Operating Expenditures:
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)
(i) Federal Share $\qquad$
(ii) Non-Federal Share. $\qquad$
(b) Other Federal Operating Expenditures $\qquad$
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))
22. Transfers to Affiliated/Other Party Committees
23. Contributions to

Federal Candidates/Committees and Other Political Committees. $\qquad$
24. Independent Expenditures (use Schedule E)
25. Coordinated Party Expenditures
(2 U.S.C. §441a(d))
(use Schedule F)... $\qquad$
26. Loan Repayments Made $\qquad$
27. Loans Made
28. Refunds of Contributions To:
(a) Individuals/Persons Other Than Political Committees
(b) Political Party Committees $\qquad$
(c) Other Political Committees (such as PACs)..
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ))...........

|  | 0.00 |
| :---: | :---: |
| , 0.00 |  |

30. Federal Election Activity (2 U.S.C. §431(20))
(a) Allocated Federal Election Activity (from Schedule H6)
(i) Federal Share $\qquad$
(ii) "Levin" Share. $\qquad$
(b) Federal Election Activity Paid Entirely With Federal Funds $\qquad$
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).
.... $\downarrow$

COLUMN A Total This Period

|  | 0.00 |
| :---: | :---: |
|  | 0.00 |
|  | 0.00 |
|  | 0,00 |

$\square 7000.00$
$\square, 0.00$

|  | 0.00 |
| :---: | :---: |

0.00
$0,0.00$

|  | 0.00 |
| :---: | :---: |
|  | 0.00 |


|  | 0.00 |
| :---: | :---: |
|  | 0.00 |
|  | ,$\quad 0.00$ |
|  | 0.00 |


| $\square$, | 0.00 |
| :---: | :---: |
|  | 0.00 |


| 0.00 |
| :---: |
| $0.00$ |
| 0.00 |
| 0.00 |
| $12000.00$ |
| $44000.00$ |
| $0.00$ |
| , 0.00 |
| , 0.00 |
| $0.00$ |
| $0.00$ |
| 0.00 |
| 0.00 |


|  | 0.00 |
| :---: | :---: |
|  | 0.00 |
|  | ,$\quad 0.00$ |
|  | ,$\quad 0.00$ |

COLUMN B Calendar Year-to-Date
31. Total Disbursements (add Lines 21 (c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..

32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31). $\qquad$


DETAILED SUMMARY PAGE
of Disbursements
Page 5
FEC Form 3X (Rev. 02/2003)

## III. Net Contributions/Operating Expenditures

33. Total Contributions (other than loans) (from Line 11(d), page 3)
34. Total Contribution Refunds (from Line 28(d))
35. Net Contributions (other than loans)
(subtract Line 34 from Line 33)
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .........
37. Offsets to Operating Expenditures (from Line 15, page 3) $\qquad$
38. Net Operating Expenditures (subtract Line 37 from Line 36) $\qquad$


## COLUMN B Calendar Year-to-Date



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

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

FOR LINE NUMBER: $\quad$ PAGE 6 OF 25 (check only one)


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 Alabama PAC

Full Name (Last, First, Middle Initial)


Date of Receipt

| $\begin{gathered} M 1 \\ 06 \end{gathered}$ |  | $2016$ |
| :---: | :---: | :---: |

Transaction ID : PR122928023995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$16.06 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Michael J. Velezis

Mailing Address 450 Riverchase Parkway East

| City | State Zip Code |  |  |
| :---: | :---: | :---: | :---: |
| Birmingham |  |  |  |
| FEC ID number of contributing federal political committee. | C |  |  |
| Name of Employer BCBS AL | Occupation VP Legal Services |  |  |
| Receipt For:$\square$Primary $\quad \square$ General <br> $\square$ Other (specify) | Aggreg | r-to-Date | $1249.98$ |

Date of Receipt

| 06 | $\begin{gathered} D \quad D \\ 30 \end{gathered}$ | , | $2016$ |
| :---: | :---: | :---: | :---: |

Transaction ID : PR125562723995
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$208.33 Monthly)

## Full Name (Last, First, Middle Initial)

C. Angela D Jarrett

Mailing Address 2 North Jackson Street Suite 202

| City | State | Zip Code |
| :--- | :---: | :---: |
| Montgomery | AL | 36104 |
| FEC ID number of contributing | C |  |
| federal political committee. | C |  |


| Name of Employer <br> BLUPAC | Occupation <br> VP Claims \& Benefit Admin |
| :--- | :--- |
| Receipt For: | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |
| $\square$ Primary $\square$ General |  |
| $\square$ Other (specify) $\boldsymbol{\nabla}$ |  |

## Date of Receipt

| $06$ | $\begin{array}{\|c\|} \hline D \quad D \\ 30 \end{array}$ | $2016$ |
| :---: | :---: | :---: |

Transaction ID : PR130963523995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $448.78$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | リ.\| |

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

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

FOR LINE NUMBER: PAGE 7 OF 25 (check only one)


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 Alabama PAC

Full Name (Last, First, Middle Initial)

| Mailing Address 1905 Balfour Dr |  |
| :---: | :---: |
| City | State Zip Code |
| Birmingham | AL 35216-2703 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer | Occupation |
| BCBS Alabama | VP Customer Service |
| Receipt For: | Aggregate Year-to-Date $\boldsymbol{V}$ |
| Other (specify) | , 1249.98 |

Date of Receipt

| M 06 | D 30 | 2016 |
| :---: | :---: | :---: |

Transaction ID : PR78822923995
Amount of Each Receipt this Period
$\square 208.33$
$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name (Last, First, Middle Initial)
B. Timothy Vines

Mailing Address 717 Savannah PI

| City | State Zip Code <br> AL $35226-3262$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer BCBS Alabama | Occupation <br> Chief Administrative Officer |
|  | Aggregate Year-to-Date <br> 1249.98 |

Date of Receipt


Transaction ID : PR78823023995
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name (Last, First, Middle Initial)
C. Jonathan T Berkery

Mailing Address 703 Morris Blvd

| City <br> Birmingham | State Zip Code <br> AL $35209-6223$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer <br> BCBS Alabama | Occupation <br> Application Dev Manager |
| Receipt For: $\square$ Primary General Other (specify) | Aggregate Year-to-Date $\square$ <br> 200.98 |

Date of Receipt

| 06 | $30$ | $2016$ |
| :---: | :---: | :---: |

Transaction ID : PR78825423995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$15.46 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $447.58$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)........................................................ |  |

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

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

FOR LINE NUMBER: PAGE 8 OF 25 (check only one)


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 Alabama PAC
Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : PR78825523995
Amount of Each Receipt this Period
$\square \quad 40.00$
$\square$ Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

## Full Name (Last, First, Middle Initial)

B. Dick Dowling Briggs

Mailing Address 4327 Kennesaw Dr

| City | State Zip Code |  |  |
| :---: | :---: | :---: | :---: |
| Birmingham | AL 35213-3311 |  |  |
| FEC ID number of contributing federal political committee. | C |  |  |
| Name of Employer BCBS Alabama | Occupation <br> Chief Business Officer |  |  |
|  | Aggreg | r-to-Date | $1249.98$ |

Date of Receipt

| 06 | D 1 D <br> 30 | , | $2016$ |
| :---: | :---: | :---: | :---: |

Transaction ID : PR78825823995
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name (Last, First, Middle Initial)
c. William G Bruner

Mailing Address 812 Hickory Trace Cir

| City Birmingham | State Zip Code <br> AL $35244-4545$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer BCBS Alabama | Occupation District Manager |
|  | Aggregate Year-to-Date $\square$ <br> 221.78 |

## Date of Receipt



Transaction ID : PR78826023995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$17.06 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)........................................................................... | 282.45 |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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

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

FOR LINE NUMBER: PAGE 9 OF 25 (check only one)


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 Alabama PAC
Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : PR78826223995
Amount of Each Receipt this Period
$\square 49.48$
$\square$ Memo Item

P/R Deduction (\$24.74 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Noel W Carden

Mailing Address 5783 Cypress Trce

| City <br> Birmingham | State | Zip Code |  |
| :---: | :---: | :---: | :---: |
|  | AL | 35244-548 |  |
| FEC ID number of contributing federal political committee. | C |  |  |
| Name of Employer BCBS Alabama | Occup <br> VP and | ctuary |  |
|  | Aggreg | r-to-Date | $1249.98$ |

Date of Receipt


Transaction ID : PR78826323995
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name (Last, First, Middle Initial)
C. Tony H Carter

Mailing Address 156 Stonegate Dr

| City Birmingham | State Zip Code <br> AL $35242-7054$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer BCBS Alabama | Occupation <br> VP Consumer Insurance Sales |
|  | Aggregate Year-to-Date $\square$ <br> 1249.98 |

## Date of Receipt



Transaction ID : PR78826423995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................. | $466.14$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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

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

FOR LINE NUMBER: PAGE 10 OF 25 (check only one)


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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : PR78826923995
Amount of Each Receipt this Period
$\square 208.33$
$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

## Full Name (Last, First, Middle Initial)

B. Charles B DeCroes

Mailing Address 1392 Belmont Ln

| City <br> Helena | State | Zip Code |
| :--- | :--- | :--- |
| FEC ID number of contributing | AL | 35080-4004 |
| federal political committee. | C |  |
| Name of Employer | Occupation |  |
| BCBS Alabama | Dept Mgr Technology Support |  |
| Receipt For: |  |  |
| $\square$ Primary $\square$ General | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |  |
| $\square$ Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78827123995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$18.93 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Joseph Edward Dunsmore

Mailing Address 4474 Heritage Park Dr

| City <br> Birmingham | State Zip Code <br> AL $35226-4171$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer BCBS Alabama | Occupation <br> VP Application Development |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ |

## Date of Receipt

| 06 | D 30 | $2016$ |
| :---: | :---: | :---: |

Transaction ID : PR78827623995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $454.52$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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

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

FOR LINE NUMBER: PAGE 11 OF 25 (check only one)


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 Alabama PAC
Full Name (Last, First, Middle Initial)


Date of Receipt

| $\begin{gathered} M \\ 06 \end{gathered}$ | $\begin{array}{\|c\|} \hline D C D \\ 30 \end{array}$ | $\begin{gathered} Y-Y \text { Y } \\ 2016 \end{gathered}$ |
| :---: | :---: | :---: |

Transaction ID : PR78827723995
Amount of Each Receipt this Period
$\square 208.33$
$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name (Last, First, Middle Initial)
B. Shirley H Finley

Mailing Address 4221 Waterford Ln

| City | State | Zip Code |
| :--- | :--- | :--- |
| Trussville | AL | 35173-1567 |

Date of Receipt


Transaction ID : PR78828023995
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$16.47 Bi-Weekly)

## Full Name (Last, First, Middle Initial)

C. Elizabeth A Hamlin

Mailing Address PO Box 361343

| City Birmingham | State Zip Code <br> AL $35236-1343$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer <br> BCBS Alabama | Occupation <br> Director Associate Services |
|  | Aggregate Year-to-Date $\square$ <br> 235.04 |

## Date of Receipt



Transaction ID : PR78828423995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$18.08 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)................................................................. | $277.43$ |
| :---: | :---: |
| TOTAL This Period (last page this line number 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 OF 25 (check only one)


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 Alabama PAC

Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : PR78828523995
Amount of Each Receipt this Period
$\square 208.33$

## $\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name (Last, First, Middle Initial)
B. Harold Wayne Harrison

Mailing Address 1104 Walnut Cir

| City <br> Alabaster | State | Zip Code |
| :--- | :--- | :--- |
| AL | $35007-9300$ |  |
| FEC ID number of contributing |  |  |
| federal political committee. | C |  |
| Name of Employer <br> BCBS Alabama | Occupation <br> Receipt For: <br> Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{\nabla}$ | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |

Date of Receipt

| 06 | $\begin{gathered} D \quad D \\ 30 \end{gathered}$ | , | $2016$ |
| :---: | :---: | :---: | :---: |

Transaction ID : PR78828623995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$16.89 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Sharon Rothe Heaton

Mailing Address 2605 Old Woodstock Trl

| City <br> Birmingham | State <br> AL | Zip Code <br> $35216-5807$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer | Occupation |  |
| BCBS Alabama | Manager Claims Processing |  |

Date of Receipt


Transaction ID : PR78828823995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$17.12 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $276.35$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | - , - , - \| - . |

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

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

FOR LINE NUMBER: PAGE 13 OF 25 (check only one)


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 Alabama PAC
Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : PR78829023995
Amount of Each Receipt this Period
$\square \quad 40.00$
$\square$ Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Jeffrey A Ingrum

Mailing Address 4008 Charring Cross Ln

| City | State Zip Code |  |  |
| :---: | :---: | :---: | :---: |
| Birmingham | AL 35226-2092 |  |  |
| FEC ID number of contributing federal political committee. | C |  |  |
| Name of Employer BCBS Alabama | Occupa <br> SVP He | Networks |  |
|  | Aggreg | r-to-Date | $1249.98$ |

Date of Receipt

| 06 | $\begin{gathered} D \quad D \\ 30 \end{gathered}$ | , | $2016$ |
| :---: | :---: | :---: | :---: |

Transaction ID : PR78829223995
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$208.33 Monthly)

## Full Name (Last, First, Middle Initial)

c. David C Johnson

Mailing Address 2508 wilowbrook cr

| City Birmingham | State Zip Code <br> AL 35242 |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer <br> BCBS Alabama | Occupation <br> Strategy Consult Technical Adv |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ |

## Date of Receipt



Transaction ID : PR78829423995
Amount of Each Receipt this Period

$\square$ Memo Item

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

| SUBTOTAL of Receipts This Page (optional)................................................................ | $284.33$ |
| :---: | :---: |
| TOTAL This Period (last page this line number 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 OF 25 (check only one)


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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC

Full Name (Last, First, Middle Initial)


Date of Receipt

| $\begin{gathered} M-M \\ 06 \end{gathered}$ | $\begin{gathered} \mathrm{D} \cdot \mathrm{D} \\ 30 \end{gathered}$ | 2016 |
| :---: | :---: | :---: |

Transaction ID : PR78829623995
Amount of Each Receipt this Period
$\square 208.33$
$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name (Last, First, Middle Initial)
B. Francis Hill Kohn

Mailing Address 2226 English Village Ln


Date of Receipt


Transaction ID : PR78830123995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$21.31 Bi-Weekly)

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

Mailing Address 2616 greenmont cr

| City Birmingham | State Zip Code <br> AL 35226 |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer BCBS Alabama | Occupation <br> Manager Claims Administration |
|  | Aggregate Year-to-Date <br> 227.76 |

Date of Receipt


Transaction ID : PR78830223995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$17.52 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $285.99$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)....................................................... |  |

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

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

FOR LINE NUMBER: PAGE 15 OF 25 (check only one)


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 Alabama PAC
Full Name (Last, First, Middle Initial)


Date of Receipt

| $\begin{gathered} M-M \\ 06 \end{gathered}$ | D ${ }^{\text {D }}$ ( | $\begin{gathered} \text { Y } \\ 2016 \end{gathered}$ |
| :---: | :---: | :---: |

Transaction ID : PR78830323995
Amount of Each Receipt this Period
$\square \quad 416.66$
$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

## Full Name (Last, First, Middle Initial)

B. Carol D Mackin

Mailing Address 809 Royal Ter

| City | State Zip Code |
| :---: | :---: |
| Birmingham | AL 35242-7222 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer BCBS Alabama | Occupation <br> VP Corp Comm/Community Rel |
|  | Aggregate Year-to-Date <br> 1249.98 |

Date of Receipt


Transaction ID : PR78830723995
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$208.33 Monthly)

## Full Name (Last, First, Middle Initial)

C. Douglas E McIntyre

Mailing Address 3489 Birchwood Ln

| City <br> Birmingham | State Zip Code <br> AL $35243-4434$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer BCBS Alabama | Occupation <br> VP Network Operations |
|  | Aggregate Year-to-Date $\square$ <br> 1249.98 |

## Date of Receipt

| M 06 | ( $\begin{gathered}\text { D } \\ 30\end{gathered}$ | $2016$ |
| :---: | :---: | :---: |

Transaction ID : PR78830923995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)


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

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

FOR LINE NUMBER: PAGE 16 OF 25 (check only one)


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nAME OF COMmitTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name (Last, First, Middle Initial)
A. John Matthew Moor

Mailing Address 18 Montcrest Dr

| Mailing Address 18 Montcrest Dr |  |
| :---: | :---: |
| City | State Zip Code |
| Birmingham | AL 35213-3022 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer | Occupation |
| BCBS Alabama | VP UTIC |
| Receipt For: | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |
| Other (specify) | $1249.98$ |

Date of Receipt

| M 06 | D $\quad 1$ 30 | $\begin{gathered} Y-Y \\ 2016 \end{gathered}$ |
| :---: | :---: | :---: |

Transaction ID : PR78831323995
Amount of Each Receipt this Period
$\square 208.33$
$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name (Last, First, Middle Initial)
B. Joe S Morris

Mailing Address 908 Lakeview Estates Dr

| City <br> Bessemer | State <br> AL | Zip Code <br> $35023-5810$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer | Occupation |  |
| BCBS Alabama | Director Facilities Operations |  |
| Receipt For: |  |  |
| $\square$ Primary $\square$ General | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |  |
| Other (specify) $\boldsymbol{\nabla}$ |  |  |

Date of Receipt


Transaction ID : PR78831523995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$18.76 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. John M Morrissette

Mailing Address 1515 Amherst Cir

| City <br> Birmingham | State <br> AL | Zip Code <br> $35216-1009$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer | Occupation |  |
| BCBS Alabama | Mgr Sales Sup/Nat'l Accts |  |

## Date of Receipt



Transaction ID : PR78831623995
Amount of Each Receipt this Period

$\square$ Memoltem

P/R Deduction (\$25.00 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)................................................................. | $295.85$ |
| :---: | :---: |
| TOTAL This Period (last page this line number 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 OF 25 (check only one)


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 Alabama PAC
Full Name (Last, First, Middle Initial)


Date of Receipt

| $\begin{gathered} M-M \\ 06 \end{gathered}$ | D ${ }^{\text {D }}$ ( | $\begin{gathered} \text { Y } \\ 2016 \end{gathered}$ |
| :---: | :---: | :---: |

Transaction ID : PR78831723995
Amount of Each Receipt this Period
$\square 208.33$
$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name (Last, First, Middle Initial)
B. Christopher A Parton

Mailing Address 101 Creekwood Ln

| City | State Zip Code |
| :---: | :---: |
| Helena | AL 35080-3273 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer BCBS Alabama | Occupation <br> Chief Info Security Officer |
| Receipt For:$\square$Primary $\quad \square$ General <br> $\square$ Other (specify) $\nabla$ | Aggregate Year-to-Date $260.00$ |

Date of Receipt


Transaction ID : PR78831923995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Michael L Patterson

Mailing Address 1809 Lucinda Robey PI

| City <br> Birmingham | State <br> AL | Zip Code <br> 35211-3872 |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer | Occupation |  |
| BCBS Alabama | SVP and Chief Legal Officer |  |

## Date of Receipt

| 06 | D 30 | $2016$ |
| :---: | :---: | :---: |

Transaction ID : PR78832023995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional).......................................................................... | $456.66$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)...................................................... |  |

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

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

FOR LINE NUMBER: PAGE 18 OF 25 (check only one)


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 Alabama PAC

Full Name (Last, First, Middle Initial)


Full Name (Last, First, Middle Initial)
B. Sandra B Rumph

Mailing Address 5448 Scout Creek Dr

| City <br> Birmingham | State <br> AL | Zip Code <br> $35244-3936$ |
| :--- | :--- | :--- |
| FEC ID number of contributing | C |  |
| federal political committee. |  |  |
| Name of Employer | Occupation |  |
| BCBS Alabama | Health Management Dept Mgr |  |
| Receipt For: |  |  |
| $\square$ Primary $\square$ General | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |  |
| $\square$ Other (specify) $\boldsymbol{V}$ |  |  |

Full Name (Last, First, Middle Initial)
C. Vickie L Saxon

Mailing Address 4127 Heatherhedge Ln

| City Birmingham | State Zip Code <br> AL $35226-2095$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer BCBS Alabama | Occupation <br> SVP Enterprise Resources |
|  | Aggregate Year-to-Date $\square$ <br> 1249.98 |

Date of Receipt


Transaction ID : PR78832123995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$24.42 Bi-Weekly)

Date of Receipt


Transaction ID : PR78832323995
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$21.61 Bi-Weekly)

Date of Receipt

| $06$ | $\begin{array}{\|c\|} \hline D \quad D \\ 30 \end{array}$ | $2016$ |
| :---: | :---: | :---: |

Transaction ID : PR78832723995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $300.39$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | - , - , - \|r.|. |

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

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

FOR LINE NUMBER: PAGE 19 OF 25 (check only one)


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 Alabama PAC
Full Name (Last, First, Middle Initial)

| Mailing Address 319 Chestnut Ln |  |
| :---: | :---: |
| City | State Zip Code |
| Alabaster | AL 35007-8537 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer | Occupation |
| BCBS Alabama | Application Dev Manager |
| Receipt For: | Aggregate Year-to-Date $\boldsymbol{V}$ |
| Other (specify) | $308.62$ |

Date of Receipt


Transaction ID : PR78832923995
Amount of Each Receipt this Period
$\square \quad 47.48$
$\square$ Memo Item

P/R Deduction (\$23.74 Bi-Weekly)

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

Mailing Address 5440 Magnolia Trce

| City <br> Birmingham | State | Zip Code |
| :--- | :--- | :--- |
| AL | 35244-4533 |  |

Date of Receipt


Transaction ID : PR78833223995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$19.16 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Joseph Robin Stone

Mailing Address 3755 Everest Dr

| City <br> Montgomery | State Zip Code <br> AL $36106-3336$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer BCBS Alabama | Occupation <br> VP Governmental Affairs |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ <br> 720.00 |

## Date of Receipt

| M 06 | ( $\begin{gathered}\text { D } \\ 30\end{gathered}$ | $2016$ |
| :---: | :---: | :---: |

Transaction ID : PR78833623995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$120.00 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................. | $205.80$ |
| :---: | :---: |
| 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: PAGE 20 OF 25 (check only one)


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nAME OF COMMItTEE (In Full)
Blue Cross Blue Shield of Alabama PAC

Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : PR78833723995
Amount of Each Receipt this Period
$\square \quad 32.00$
$\square$ Memo Item

P/R Deduction (\$16.00 Bi-Weekly)

## Full Name (Last, First, Middle Initial)

B. Chris M Sultis

Mailing Address 80 N Village Dr

| City | State Zip Code |
| :---: | :---: |
| Gardendale | AL 35071-4706 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer BCBS Alabama | Occupation <br> U/Mgr Server Engineering |
| Receipt For:$\square$Primary $\quad \square$ General <br> $\square$ Other (specify) $\nabla$ | Aggregate Year-to-Date $\square$ |

Date of Receipt


Transaction ID : PR78833823995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Jeffrey R Syphurs

Mailing Address 318 Bedford Ave

| City <br> Birmingham | State <br> AL | Zip Code <br> $35226-1505$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer | Occupation |  |
| BCBS Alabama | Manager Claims Operations |  |

## Date of Receipt



Transaction ID : PR78833923995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$16.31 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $104.62$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | リ.\| |

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

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

FOR LINE NUMBER: PAGE 21 OF 25 (check only one)


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nAME OF COMmitTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name (Last, First, Middle Initial)


Date of Receipt

| $\begin{gathered} M-M \\ 06 \end{gathered}$ | D ${ }^{\text {D }}$ ( | $\begin{gathered} \text { Y } \\ 2016 \end{gathered}$ |
| :---: | :---: | :---: |

Transaction ID : PR78834323995
Amount of Each Receipt this Period
$\square 208.33$
$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name (Last, First, Middle Initial)
B. Joseph Clay Walden

Mailing Address 14 Signal Hill Rd

| City | State Zip Code |
| :---: | :---: |
| Spanish Fort | AL 36527-3138 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer BCBS Alabama | Occupation District Manager |
|  | Aggregate Year-to-Date $\square$ |

Date of Receipt


Transaction ID : PR78834523995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$21.31 Bi-Weekly)

## Full Name (Last, First, Middle Initial)

c. Brandon S Ward

Mailing Address 109 Coshatt Trl

| City <br> Birmingham | State <br> AL |
| :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | Zip Code <br> $35244-2439$ |
| Name of Employer | C |
| BCBS Alabama | Occupation <br> VP Business Services |
| Receipt For: <br> Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ | Aggregate Year-to-Date $\mathbf{V}$ |

## Date of Receipt

| M 06 | ( $\begin{gathered}\text { D } \\ 30\end{gathered}$ | $2016$ |
| :---: | :---: | :---: |

Transaction ID : PR78834623995
Amount of Each Receipt this Period

$\square$ Memoltem

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................. | $459.28$ |
| :---: | :---: |
| TOTAL This Period (last page this line number 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 OF 25 (check only one)


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nAME OF COMMItTEE (In Full)
Blue Cross Blue Shield of Alabama PAC

Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : PR78834723995
Amount of Each Receipt this Period
$\square \quad 37.84$
$\square$ Memo Item

P/R Deduction (\$18.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. James M Watkins

Mailing Address 1935 Red Oak Ln NE

| City | State Zip Code |
| :---: | :---: |
| Arab | AL 35016-5360 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer BCBS Alabama | Occupation District Manager |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $247.65$ |

Date of Receipt

| 06 | $\begin{gathered} D \quad D \\ 30 \end{gathered}$ | , | $2016$ |
| :---: | :---: | :---: | :---: |

Transaction ID : PR78834823995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$19.05 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Ronald B Whitehead

Mailing Address 1009 Margaret St

| City <br> Leeds | State <br> AL | Zip Code <br> $35094-2736$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer | Occupation |  |
| BCBS Alabama | HBS CFO |  |

## Date of Receipt

| 06 | / D D ${ }^{\text {c }}$ | $2016$ |
| :---: | :---: | :---: |

Transaction ID : PR78834923995
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$21.87 Bi-Weekly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $163.42$ |
| :---: | :---: |
| TOTAL This Period (last page this line number 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 OF 25 (check only one)


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


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

Date of Receipt


## Amount of Each Receipt this Period



| SUBTOTAL of Receipts This Page (optional)................................................................ | $208.33$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)...................................................... | , 6251.24 |

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



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 Alabama PAC

| Full Name (Last, First, Middle Initial) |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| A. Blue PAC - BCBS Association PAC |  |  |  |  | Date of Disbursement |  |  |  |
| Mailing Address 1310 G Street, NW |  |  |  |  |  |  |  |  |
| City State Zip Code |  |  |  |  | Transaction ID : 9913902 |  |  |  |
| Washington |  |  |  |  |  |  |  |  |
| Purpose of Disbursement Affilated Transfer |  |  |  |  | Amount of Each Disbursement this Period |  |  |  |
|  |  |  |  | 008 |  |  |  |  |
| Candidate Name <br> Blue PAC - BCBS Association PAC |  |  |  | $\begin{aligned} & \text { Category/ } \\ & \text { Type } \end{aligned}$ | $\square 7000.00$ |  |  |  |
|  |  |  |  |  |  |  |  |  |
| Office Sought: | House | Disbursement For: |  |  | $\square$ Memo Item Affilated Transfer |  |  |  |
|  | Senate |  |  |  |  |  |  |  |
|  | $\square$ President |  |  |  |  |  |  |  |  |
| State: | District: |  |  |  |  |  |  |  |  |

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

| Mailing Address |  |  |  |
| :---: | :---: | :---: | :---: |
| City |  | State Zip Code |  |
| Purpose of Disbursement |  |  |  |
| Candidate Name |  |  | Category/ Type |
| Office Sought: |  House <br> Senate <br> $\square$ President |  |  |

## Date of Disbursement <br> MIM ' DID ' YIYTYIV

Amount of Each Disbursement this Period

$\square$ Memo Item

Date of Disbursement

| Mailing Address |  |  |  |
| :---: | :---: | :---: | :---: |
| City |  | State Zip Code |  |
| Purpose of Disbursement |  |  |  |
| Candidate Name |  |  | Category/ Type |
| Office Sought: <br> State: |  House <br> Senate <br> $\square$ President |  |  |



| SUBTOTAL of Disbursements This Page (optional). | 7000.00 |
| :---: | :---: |
| TOTAL This Period (last page this line number only).................................................. | 7000.00 |

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



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 Alabama PAC


Full Name (Last, First, Middle Initial)
B. Tallatchee Creek Inc. PAC

c.

| Mailing Address |  |  |  |
| :---: | :---: | :---: | :---: |
| City |  | State Zip Code |  |
| Purpose of Disbursement |  |  |  |
| Candidate Name |  |  | Category/ Type |
| Office Sought: |  House <br>  <br> Senate <br> $\square$ President |  |  |

Date of Disbursement


Amount of Each Disbursement this Period

$\square$ Memo Item

| SUBTOTAL of Disbursements This Page (optional)................................................. | 10000.00 |
| :---: | :---: |
| TOTAL This Period (last page this line number only)................................................... | 10000.00 |

