

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


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

|  |  |  |  |  |  | Fffice <br> Use <br> Only |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |

FEC Form 3X (Rev. 05/2016)

## Write or Type Committee Name <br> Blue Cross Blue Shield of Alabama PAC



| COLUMN A | COLUMN B |
| :--- | :---: |
| This Period | Calendar Year-to-Date |

6. (a) Cash on Hand January 1,

| Y-Y |
| :---: |
| 2016 |


(b) Cash on Hand at

Beginning of Reporting Period............



(d) Subtotal (add Lines 6(b) and

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

228930.79
7. Total Disbursements (from Line 31) $\qquad$
$\square 0.00$

8. Cash on Hand at Close of Reporting Period
(subtract Line 7 from Line 6(d)) $\qquad$

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


|  |  | 67925.61 |
| :---: | :---: | :---: |
|  | , | 7105.70 |
|  | , | 75031.31 |
|  | , | 0.00 |
|  |  | 0.00 |


| 0 |  | 12678.13 |
| :--- | :--- | :--- |
|  |  | 0.00 |
|  |  | 0.00 |
|  |  | 0.00 |
|  |  |  |


|  |  | 75031.31 |
| :---: | :---: | :---: |
|  |  | 0.00 |
|  |  | 0.00 |
|  |  | 0.00 |
|  |  |  |
|  |  | 0.00 |

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.


| 10.00 |  |  |
| :--- | :--- | :--- |
|  | 0 | 0.00 |

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

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

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)) ........
$\square, 75031.31$
20. Total Federal Receipts
(subtract Line 18(c) from Line 19) ......... $\downarrow$


FEC Form 3X (Rev. 05/2016)

## II. Disbursements

21. Operating Expenditures:
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)
(i) Federal Share $\qquad$
$\qquad$
(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
24. Independent Expenditures (use Schedule E)
25. Coordinated Party Expenditures
(52 U.S.C. § 30116(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 $\qquad$
(b) Political Party Committees $\qquad$
(c) Other Political Committees (such as PACs).
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) $\qquad$
$\qquad$
29. Other Disbursements (Including Non-Federal Donations) $\qquad$
0.00

COLUMN B Calendar Year-to-Date

0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))
(a) Allocated Federal Election Activity (from Schedule H6)
$\qquad$
(ii) "Levin" Share.
(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))..

|  | 0.00 |  |
| :---: | :---: | :---: |
| $\Rightarrow$, | 0.00 |  |
| $\Rightarrow$, | 0.00 |  |
|  |  | 0.00 |


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). $\qquad$
$\square$
$\square \quad 98500.00$

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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)) $\qquad$
37. Offsets to Operating Expenditures (from Line 15, page 3) $\qquad$
38. Net Operating Expenditures (subtract Line 37 from Line 36) $\qquad$

COLUMN A
Total This Period

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 26 (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 of Individual (Last, First, Middle Initial) or Full Organization Name
A. Echols, Molly, B, ,

Mailing Address 2 North Jackson St

| Mailing Address 2 North Jackson St |  |  |
| :---: | :---: | :---: |
| City <br> Montgomery | State <br> AL | $\begin{gathered} \hline \text { Zip Code } \\ 36104 \end{gathered}$ |
| FEC ID number of contributing federal political committee. | $\mathrm{C}$ |  |
| Name of Employer (for Individual) BCBS of AL |  | ion (for Individual) Internal Audit |
|  | Aggreg |  |

Date of Receipt


Transaction ID : PR122928026549
Amount of Each Receipt this Period


Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Velezis, Michael, J., ,

Mailing Address 450 Riverchase Parkway East

| City | State | Zip Code |
| :---: | :---: | :---: |
| Birmingham | AL | 35244 |
| FEC ID number of contributing federal political committee. | C | , |
| Name of Employer (for Individual) BCBS AL |  | tion (for Individual) al Services |
|  | Aggrega |  |

Date of Receipt


Transaction ID: PR125562726549
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Jarrett, Angela, D, ,

Mailing Address 2 North Jackson Street Suite 202

| City <br> Montgomery | State <br> AL | Zip Code <br> 36104 |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) |  |  |
| BLUPAC | Occupation (for Individual) <br> Receipt For: <br> Primary Claims \& Benefit Admin <br> Other (specify) |  |

Date of Receipt


Transaction ID : PR130963526549
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................. | $881.50$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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

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

FOR LINE NUMBER: PAGE 7 OF 26 (check only one)


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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Weaver, Darrel, Craig,

Mailing Address 450 Riverchase Parkway East

| Mailing Address 450 Riverchase Parkway East |  |  |
| :---: | :---: | :---: |
| City <br> Birmingham | State <br> AL | $\begin{array}{\|c\|} \hline \text { Zip Code } \\ 35244 \end{array}$ |
| FEC ID number of contributing federal political committee. | $\mathrm{C}$ |  |
| Name of Employer (for Individual) BLUPAC |  | ion (for Individual) thcare Networks Svcs |
|  | Aggreg | -to-Date $833.32$ |

Date of Receipt


Transaction ID : PR132319626549
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Keown, Kipp, D, ,

Mailing Address 450 Riverchase Parkway East

| City | State | Zip Code |
| :---: | :---: | :---: |
| Birmingham | AL | 35244 |
| FEC ID number of contributing federal political committee. | C | , |
| Name of Employer (for Individual) BLUPAC |  | tion (for Individual) keting |
|  | Aggrega | $833.32$ |

Date of Receipt


Transaction ID : PR132319726549
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Orr, Robert, R, ,

Mailing Address 1905 Balfour Dr

| City <br> Birmingham |
| :--- |
| FEC ID number of contributing <br> federal political committee. |
| State <br> AL |
| Name of Employer (for Individual) <br> BCBS Alabama |
| Receipt For: <br> $\square$ Primary <br> Other (specify) |
| General |



## 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 26 (check only one)


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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Vines, Timothy, , ,

Mailing Address 717 Savannah PI

| City Birmingham | $\begin{array}{\|l\|} \hline \text { State } \\ \text { AL } \end{array}$ | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35226-3262 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Chief Administrative Officer |  |
|  | Aggreg | r-to-Date <br> 2291.63 |

Date of Receipt

| $11$ | $\begin{gathered} D \quad D \\ 28 \end{gathered}$ |  |
| :---: | :---: | :---: |

Transaction ID : PR78823026549
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Barth, John, Walter, ,

Mailing Address 212 Erwin Cir

| City <br> Birmingham | State <br> AL | Zip Code <br> $35216-1718$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) |  |  |
| BCBS Alabama |  |  | | Receipt For: |
| :--- |
| $\square$Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ |

Date of Receipt


Transaction ID : PR78825326549
Amount of Each Receipt this Period
$\square$, 40.71

## Memo Item

P/R Deduction (\$13.57 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Berkery, Jonathan, T, ,

Mailing Address 703 Morris Blvd

| City Birmingham | State <br> AL | Zip Code 35209-6223 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | $\mathrm{C}$ |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Application Dev Manager |  |
| Receipt For: Primary General Other (specify) | Aggreg | r-to-Date $371.04$ |

Date of Receipt


Amount of Each Receipt this Period


## Memo Item

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

| SUBTOTAL of Receipts This Page (optional)................................................................ | $503.75$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | - |

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

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

FOR LINE NUMBER: PAGE 9 OF 26 (check only one)


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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Bonner, Laura, H, ,

Mailing Address 226 Cambo Ter

| Mailing Address 226 Cambo Ter |  |  |
| :---: | :---: | :---: |
| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35226-1078 \end{array}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) gr Enrollment Services |
| Receipt For: Primary General Other (specify) | Aggreg | r-to-Date $480.00$ |

Date of Receipt


## Transaction ID : PR78825526549

Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Briggs, Dick, Dowling, ,

Mailing Address 4327 Kennesaw Dr

| City <br> Birmingham | State <br> AL | Zip Code <br> $35213-3311$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) |  |  |
| BCBS Alabama |  |  | | Receipt For: |  |
| :--- | :--- |
| $\square$Primary <br> Other (specify) $\boldsymbol{V}$ | Occupation (for Individual) <br> Chief Business Officer |

Date of Receipt


Transaction ID : PR78825826549
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

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

c. Bruner, William, G, ,

Mailing Address 812 Hickory Trace Cir

| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35244-4545 \\ \hline \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) Manager |
| Receipt For: Primary General Other (specify) | Aggreg | r-to-Date $409.44$ |


| SUBTOTAL of Receipts This Page (optional)............................................................... | $527.84$ |
| :---: | :---: |
| TOTAL This Period (last page this line number 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
26 (check only one)


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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Byrd, Richard, E,

Mailing Address 3713 Tudor Ln


Date of Receipt

| ${ }^{\text {M }} 11$ | 28 | $2016$ |
| :---: | :---: | :---: |

Transaction ID : PR78826226549
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Carden, Noel, W, ,

Mailing Address 5783 Cypress Trce

| City <br> Birmingham | State <br> AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35244-5481 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) VP and Chief Actuary |  |
|  | Aggrega |  |

Date of Receipt


Transaction ID : PR78826326549
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Carter, Tony, H, ,

Mailing Address 156 Stonegate Dr

| City Birmingham | State <br> AL | Zip Code 35242-7054 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) VP Consumer Insurance Sales |  |
|  | Aggreg | r-to-Date $2291.63$ |

## Date of Receipt



Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)............................................................... | $882.80$ |
| :---: | :---: |
| 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 11 OF (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 of Individual (Last, First, Middle Initial) or Full Organization Name
A. Council, Rebekah, Elgin, ,

Mailing Address 919 38th St S

| Mailing Address 919 38th St S |  |
| :---: | :---: |
| City <br> Birmingham | State Zip Code <br> AL $35222-3602$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) SVP \& Chief Marketing Officer |
|  | Aggregate Year-to-Date <br> 2291.63 |

Date of Receipt


Transaction ID : PR78826926549
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DeCroes, Charles, B, ,

Mailing Address 1392 Belmont Ln

| City <br> Helena | State <br> AL | Zip Code <br> $35080-4004$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> $\square$Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78827126549
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Dinsmore, William, A, ,

Mailing Address 1921 Forest Knoll Dr

| City <br> Birmingham |
| :--- |
| FEC ID number of contributing <br> federal political committee. |
| AL |
| Name of Employer (for Individual) <br> BCBS Alabama |
| Receipt For: <br> $\square$ Primary $\quad \square$ <br> Other (specify) |

## Date of Receipt



Amount of Each Receipt this Period


## Memo Item

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


## 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

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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Dunsmore, Joseph, Edward, ,

Mailing Address 4474 Heritage Park Dr

| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35226-4171 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) ication Development |
|  | Aggreg |  |

Date of Receipt

| $11{ }^{\text {m }}$ | D 28 |  |
| :---: | :---: | :---: |

## Transaction ID : PR78827626549

Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Edwards, Brian, D, ,

Mailing Address 107 Eagle Cove Dr

| City <br> Pelham | State <br> AL | Zip Code <br> $35124-2223$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For:  <br> $\square$ Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78827726549
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Finley, Shirley, H, ,

Mailing Address 4221 Waterford Ln

| City Trussville | State <br> AL | Zip Code 35173-1567 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. |  |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Health Management Dept Mgr |  |
| Receipt For: Primary General Other (specify) | Aggrega | r-to-Date $395.28$ |

Date of Receipt


Amount of Each Receipt this Period


## Memo Item

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

| SUBTOTAL of Receipts This Page (optional)................................................................. | $882.73$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | 5 |

## 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

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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Hamlin, Elizabeth, A,

Mailing Address PO Box 361343

| Mailing Address PO Box 361343 |  |  |
| :---: | :---: | :---: |
| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35236-1343 \end{array}$ |
| FEC ID number of contributing federal political committee. | $\mathrm{C}$ |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) Associate Services |
|  | Aggrega | r-to-Date $433.92$ |

Date of Receipt


Transaction ID : PR78828426549
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Harris, Edward, O, ,

Mailing Address 3325 Brook Highland Cir

| City <br> Birmingham | State <br> AL | Zip Code <br> $35242-5816$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78828526549
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Harrison, Harold, Wayne, ,

Mailing Address 1104 Walnut Cir

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

Date of Receipt


Amount of Each Receipt this Period

$\square$ Memo Item

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

| SUBTOTAL of Receipts This Page (optional)............................................................... | $521.57$ |
| :---: | :---: |
| TOTAL This Period (last page this line number 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
26 (check only one)


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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Heaton, Sharon, Rothe,

Mailing Address 2605 Old Woodstock TrI

| Mailing Address 2605 Old Woodstock Trl |  |  |
| :---: | :---: | :---: |
| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35216-5807 \end{array}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) Claims Processing |
|  | Aggrega | r-to-Date $410.88$ |

Date of Receipt


Transaction ID : PR78828826549
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Herringdon, Sheila, P,

Mailing Address 304 fox valley highlands cr

| City | State | Zip Code |
| :---: | :---: | :---: |
| Maylene | AL | 35114 |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | tion (for Individual) lity Mngmnt Plan Perfor |
|  | Aggrega |  |

Date of Receipt


Transaction ID : PR78829026549
Amount of Each Receipt this Period


Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Ingrum, Jeffrey, A, ,

Mailing Address 4008 Charring Cross Ln

| City Birmingham | State <br> AL | Zip Code 35226-2092 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | $\mathrm{C}$ |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) SVP Health Care Networks |  |
|  | Aggrega | r-to-Date $2291.63$ |

## Date of Receipt

| $\begin{gathered} \mathrm{M} \\ 11 \end{gathered}$ | $28^{D}$ | $2016$ |
| :---: | :---: | :---: |
| Trans |  | 829226549 |

## Transaction ID : PR78829226549

Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)............................................................... | , , 528.02 |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | , - , - - - . |

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

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

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


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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Johnson, David, C, ,

Mailing Address 2508 wilowbrook cr

| 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 (for Individual) BCBS Alabama | Occupation (for Individual) <br> Strategy Consult Technical Adv |
|  | Aggregate Year-to-Date $\square$ |

Date of Receipt


## Transaction ID : PR78829426549

Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Kellogg, Terry, D, ,

Mailing Address 1230 Glen View Rd

| City <br> Birmingham | State <br> AL | Zip Code <br> $35222-4317$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) |  |  |
| BCBS Alabama |  |  | | Receipt For: |
| :--- |
| $\square$Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ |

Date of Receipt


Transaction ID : PR78829626549
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Kenney, Brian, T, ,

Mailing Address 3874 Village Center Dr

| City <br> Birmingham | State <br> AL | Zip Code <br> $35226-6263$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) | Occupation (for Individual) <br> Health Mgmt Operations Manager |  |
| RCBS Alabama  <br> Receipt For:  <br> Primary <br> Other (specify) Aggregate Year-to-Date $\mathbf{V}$ |  |  |

Date of Receipt


Amount of Each Receipt this Period

$\square$ Memo Item

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

| SUBTOTAL of Receipts This Page (optional)............................................................... | $500.66$ |
| :---: | :---: |
| 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 16 OF (check only one)


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## nAME OF COMMItTEE (In Full)

Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Kohn, Francis, Hill, ,

Mailing Address 2226 English Village Ln
$\left.\begin{array}{l|l|l|}\hline \begin{array}{l}\text { City } \\ \text { Birmingham }\end{array} & \begin{array}{l}\text { State } \\ \text { AL }\end{array} & \begin{array}{l}\text { Zip Code } \\ 35223-1731\end{array} \\ \hline \begin{array}{l}\text { FEC ID number of contributing } \\ \text { federal political committee. }\end{array} & \text { C } \\ \hline \begin{array}{l}\text { Name of Employer (for Individual) } \\ \text { BCBS Alabama }\end{array} & \begin{array}{l}\text { Occupation (for Individual) } \\ \text { Account Executive }\end{array} \\ \hline \begin{array}{l}\text { Receipt For: } \\ \square \text { Primary } \\ \text { Other (specify) } \boldsymbol{\nabla}\end{array} & \text { Aggregate Year-to-Date } \boldsymbol{V}\end{array}\right]$

Date of Receipt

| 11 | $\begin{gathered} D \\ 28 \end{gathered}$ |  |
| :---: | :---: | :---: |

## Transaction ID : PR78830126549

Amount of Each Receipt this Period


Memo Item

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

Mailing Address 2616 greenmont cr

| City <br> Birmingham | State <br> AL | Zip Code <br> 35226 |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For:  <br> $\square$ Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78830226549
Amount of Each Receipt this Period

Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. LeMier, Sherrie, D, ,

Mailing Address 2448 Lancaster Cir

| City Birmingham | State <br> AL | Zip Code 35242-4420 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | $\mathrm{C}$ |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) President \& COO HBS |  |
|  | Aggrega | r-to-Date $2291.63$ |

## Date of Receipt

| $11$ | $\begin{gathered} \text { D } 28^{\circ} \end{gathered}$ | $2016$ |
| :---: | :---: | :---: |
| Transa | ID : | 8830326549 |

Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................. ${ }^{\text {. }}$ | $324.82$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)...................................................... |  |

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

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

FOR LINE NUMBER: PAGE 17 OF

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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Lyda, John, B, ,

Mailing Address 3484 Tamassee Ln

| City <br> Birmingham | State <br> AL | Zip Code <br> $35226-2671$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama | Occupation (for Individual) <br> Meceipt For: <br> Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{\nabla}$ | Aggregate Year-to-Date $\boldsymbol{V}$ |

Date of Receipt

| $11^{M}$ | $\begin{gathered} D \quad D \\ 28 \end{gathered}$ |  |
| :---: | :---: | :---: |

## Transaction ID : PR78830626549

Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Mackin, Carol, D, ,

Mailing Address 809 Royal Ter

| City <br> Birmingham | State <br> AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35242-7222 \\ \hline \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) Comm/Community Rel |
| $\begin{aligned} & \text { Receipt For: } \\ & \square \text { Primary } \quad \square \text { General } \\ & \square \text { Other (specify) } \end{aligned}$ | Aggrega | r-to-Date 2291;63 |

Date of Receipt


Transaction ID : PR78830726549
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McIntyre, Douglas, E, , |  |  | Date of Receipt |
| :---: | :---: | :---: | :---: |
| Mailing Address 3489 Birchwood Ln |  |  |  |
| City | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35243-4434 \end{array}$ |  |
| Birmingham |  |  | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. |  |  | $416.66$ |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) thcare Network Contract | Memo Item <br> P/R Deduction (\$208.33 Monthly) |
| Receipt For:$\square$Primary $\quad \square$ General <br> $\square$ Other (specify) | Aggrega | $\text { ar-to-Date } \boldsymbol{\nabla}$ |  |
| SUBTOTAL of Receipts This Page (optional) |  |  | $\square, \quad 878.32$ |
| TOTAL This Period (last page this line number only).................................................... |  |  |  |

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

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

FOR LINE NUMBER: PAGE 18 OF

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nAME OF COMMItTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. McMahan, Kenneth, A, ,

Mailing Address 5622 Highway 55

| Mailing Address 5622 Highway 55 |  |
| :---: | :---: |
| City Wilsonville | State Zip Code <br> AL $35186-6556$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Dept Mgr Technology Support |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date <br> 240.00 |

Date of Receipt

| $11$ | $\begin{gathered} D \quad D \\ 28 \end{gathered}$ | $Y-Y$ Y 2016 |
| :---: | :---: | :---: |

## Transaction ID : PR78831126549

Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Moor, John, Matthew, ,

Mailing Address 18 Montcrest Dr

| City <br> Birmingham | State <br> AL | Zip Code <br> $35213-3022$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78831326549
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <br> C. Morris, Joe, S, , |  |  | Date of Receipt |
| :---: | :---: | :---: | :---: |
| Mailing Address 908 Lakeview Estates Dr |  |  |  |
| City Bessemer | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35023-5810 \end{array}$ | Transaction ID : PR78831526549 |
|  |  |  | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. |  |  | $56.28$ |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) Facilities Operations | Memo Item <br> P/R Deduction (\$18.76 Bi-Weekly) |
| Receipt For:$\square$Primary $\quad \square$ General <br> $\square$ Other (specify) | Aggrega | $\text { r-to-Date } \boldsymbol{\nabla}$ |  |
| SUBTOTAL of Receipts This Page (optional) |  |  | $0, \quad 502.94$ |
| TOTAL This Period (last page this line number 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 OF

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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Morrissette, John, M, ,

Mailing Address 1515 Amherst Cir

| Mailing Address 1515 Amherst Cir |  |
| :---: | :---: |
| City <br> Birmingham | State Zip Code <br> AL $35216-1009$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Mgr Sales Sup/Nat'I Accts |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date |

Date of Receipt


## Transaction ID : PR78831626549

Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Mosko, Ashley, S, ,

Mailing Address 503 Olmsted St

| City <br> Birmingham | State <br> AL | Zip Code <br> $35242-1825$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For:  <br> $\square$  <br> Primary <br> Other (specify) $\boldsymbol{V}$ Occupation (for Individual) <br> VP Health Management |  |  |

Date of Receipt


Transaction ID : PR78831726549
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Parton, Christopher, A, ,

Mailing Address 101 Creekwood Ln

| City Helena | State <br> AL | Zip Code 35080-3273 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. |  |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Director Info Security/CISO |  |
| Receipt For: Primary General Other (specify) | Aggreg | r-to-Date $480.00$ |

## Date of Receipt



Amount of Each Receipt this Period


## Memo Item

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


## 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
26 (check only one)


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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Patterson, Michael, L, ,

Mailing Address 1809 Lucinda Robey PI

| Mailing Address 1809 Lucinda Robey PI |  |
| :---: | :---: |
| City Birmingham | State Zip Code <br> AL $35211-3872$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) SVP and Chief Legal Officer |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ |

Date of Receipt

| $11^{M}$ | 28 | $\begin{gathered} y-y \\ 2016 \end{gathered}$ |
| :---: | :---: | :---: |

Transaction ID : PR78832026549
Amount of Each Receipt this Period


Memo Item

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

B. Platt, David, E, ,

Mailing Address 3700 Montevallo Rd S

| City <br> Birmingham | State <br> AL | Zip Code <br> $35213-4208$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78832126549
Amount of Each Receipt this Period


## Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Rumph, Sandra, B, ,

Mailing Address 5448 Scout Creek Dr

| City Birmingham | State <br> AL | Zip Code 35244-3936 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Health Management Dept Mgr |  |
|  | Aggrega | r-to-Date $518.64$ |

Date of Receipt


Amount of Each Receipt this Period


## Memo Item

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


## 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
26 (check only one)


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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Saxon, Vickie, L, ,

Mailing Address 4127 Heatherhedge Ln

| City <br> Birmingham | State <br> AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35226-2095 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | (for Individual) terprise Resources |
| Receipt For: Primary General Other (specify) | Aggreg | r-to-Date $2291.63$ |

Date of Receipt

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Sellers, Bobby, Ray, ,

Mailing Address 319 Chestnut Ln

| City <br> Alabaster | State <br> AL | Zip Code <br> $35007-8537$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. |  |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> $\square$Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78832926549
Amount of Each Receipt this Period


## Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Sellers, Spencer, H, ,

Mailing Address 5568 Surrey Ln

| City Birmingham | State <br> AL | Zip Code 35242-3330 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) U/Mgr Enterprise Content Mgmt |  |
|  | Aggrega | r-to-Date $240.00$ |


| SUBTOTAL of Receipts This Page (optional)................................................................ | $517.88$ |
| :---: | :---: |
| TOTAL This Period (last page this line number 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
26 (check only one)


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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Smith, Mary, C, ,

Mailing Address 5440 Magnolia Trce

| Mailing Address 5440 Magnolia Trce |  |  |
| :---: | :---: | :---: |
| City Birmingham | State <br> AL | $\begin{aligned} & \hline \text { Zip Code } \\ & 35244-4533 \end{aligned}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Director Treasury Operations |  |
|  | Aggreg | r-to-Date $459.84$ |

Date of Receipt


Transaction ID : PR78833226549
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Steed, Clay, T, ,

Mailing Address 334 Lennox Sq

| City <br> Fairhope | State <br> AL | Zip Code <br> $36532-7519$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) |  |  |
| BCBS Alabama |  |  | | Receipt For: |
| :--- |
| $\square$Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ |

Date of Receipt


Transaction ID : PR78833326549
Amount of Each Receipt this Period
$\square \quad 42.21$

## Memo Item

P/R Deduction (\$14.07 Bi-Weekly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Stone, Joseph, Robin, ,

Mailing Address 3755 Everest Dr

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

## Date of Receipt



Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$120.00 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $339.69$ |
| :---: | :---: |
| TOTAL This Period (last page this line number 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 (check only one)


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NAME OF COMMITTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Sullivan, Christine, V, ,

Mailing Address 2058 Wild Flower Dr

| Mailing Address 2058 Wild Flower Dr |  |  |
| :---: | :---: | :---: |
| City <br> Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35244-1723 \end{array}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) Executive |
| Receipt For: Primary General Other (specify) | Aggreg | r-to-Date $384.00$ |

Date of Receipt


Transaction ID : PR78833726549
Amount of Each Receipt this Period


Memo Item

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

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

Mailing Address 80 N Village Dr

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

Date of Receipt


Transaction ID : PR78833826549
Amount of Each Receipt this Period


## Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Syphurs, Jeffrey, R, ,

Mailing Address 318 Bedford Ave

| City <br> Birmingham |
| :--- |
| FEC ID number of contributing <br> federal political committee. |
| State <br> AL |
| Name of Employer (for Individual) <br> BCBS Alabama |
| Receipt For: <br> $\square$ Primary <br> Other (specify) |
| General |



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

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

FOR LINE NUMBER: PAGE 24 OF (check only one)


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nAME OF COMMItTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Vice, Cynthia, M, ,

Mailing Address 936 Beech Ln

| Mailing Address 936 Beech Ln |  |  |
| :---: | :---: | :---: |
| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35213-2024 \end{array}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) SVP \& Chief Financial Officer |  |
| Receipt For: Primary General Other (specify) | Aggrega | r-to-Date <br> 2291.63 |

Date of Receipt


Transaction ID : PR78834326549
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Walden, Joseph, Clay,

Mailing Address 14 Signal Hill Rd

| City <br> Spanish Fort | State <br> AL | Zip Code <br> $36527-3138$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> $\square$Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78834526549
Amount of Each Receipt this Period


## Memo Item

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

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

C. Ward, Brandon, S, ,

Mailing Address 109 Coshatt Trl

| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35244-2439 \\ \hline \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) VP Business Services |  |
| Receipt For: Primary General Other (specify) | Aggreg | r-to-Date $2291.63$ |


| SUBTOTAL of Receipts This Page (optional)............................................................... | $897.25$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | , |

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

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

FOR LINE NUMBER: PAGE 25 OF (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 of Individual (Last, First, Middle Initial) or Full Organization Name
A. Warren, Susan, M, ,

Mailing Address 2021 Chandapine Cir

| City <br> Pelham | State <br> AL | Zip Code <br> $35124-1430$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) | Occupation (for Individual) <br> BCBS Alabama | Dept Mgr Corporate Strategy |

Date of Receipt

| $11^{M}$ |  |  |
| :---: | :---: | :---: |

## Transaction ID : PR78834726549

Amount of Each Receipt this Period


Memo Item

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

Mailing Address 1935 Red Oak Ln NE

| City <br> Arab | State <br> AL | Zip Code <br> $35016-5360$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) |  |  |
| BCBS Alabama |  |  |
| Receipt For: |  |  |
| $\square$Primary $\quad \square$ General <br> Other (specify) $\nabla$ | Occupation (for Individual) <br> District Manager |  |

Date of Receipt


Transaction ID : PR78834826549
Amount of Each Receipt this Period
$\square 57.15$

## Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Whitehead, Ronald, B, , $\qquad$
Mailing Address 1009 Margaret St

| City <br> Leeds | State <br> AL | Zip Code 35094-2736 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | $\mathrm{C}$ |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) HBS CFO |  |
|  | Aggrega | $\qquad$ |


| SUBTOTAL of Receipts This Page (optional)................................................................. | $135.78$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | 5 - |

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

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

FOR LINE NUMBER: PAGE 26 OF 26 (check only one)


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nAME OF COMMItTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Williams, John, T, ,

Mailing Address 8625 Anna PI

| Mailing Address 8625 Anna PI |  |
| :---: | :---: |
| City <br> Montgomery | State Zip Code <br> AL $36116-6693$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) District Manager |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date |

Date of Receipt


## Transaction ID : PR78835026549

Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Hill, James, S,

Mailing Address 130 Hampton Drive

| City <br> Pelham | State <br> AL | Zip Code <br> 35244 |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) |  |  |
| BCBS AL |  |  | | Receipt For: |
| :--- |
| Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ |

Date of Receipt


Transaction ID : PR94042826549
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

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

## Mailing Address



## Date of Receipt



## Amount of Each Receipt this Period



| SUBTOTAL of Receipts This Page (optional)................................................................. | $457.94$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)........................................................ | $12675.13$ |

