

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Healthy Government Committee-The Political Action Committee of BCBSAZ

ADDRESS (number and street) P.O. Box 13466
 Check if different than previously reported. (ACC)
Phoenix AZ 85002

2. **FEC IDENTIFICATION NUMBER** C00215202
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 11 25 2008 through 12 31 2008

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

Signature of Treasurer Electronically Filed by Ms Kathryn Baker Date 01 30 2009

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Healthy Government Committee-The Political Action Committee of BCBSAZ

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		15296.95
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	11927.95									
(c) Total Receipts (from Line 19)	1679.00	22380.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	13606.95	37676.95								
7. Total Disbursements (from Line 31)	0.00	24070.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	13606.95	13606.95								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

Healthy Government Committee-The Political Action Committee of BCBSAZ

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	1340.00	8245.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	339.00	12935.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1679.00	21180.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	1679.00	21180.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	1200.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1679.00	22380.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1679.00	22380.00

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	24070.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	0.00	24070.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	24070.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	1679.00	21180.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1679.00	21180.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 21
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)
Mrs. Karen Abraham

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
Phoenix AZ 85021

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

Name of Employer Blue Cross & Blue Shield of AZ
Occupation V.P.-Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
MM / DD / YYYY
12 / 18 / 2008

Transaction ID: SA11AI.9230

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
Mr. William Arthur

Mailing Address 2444 W. Las Palmaritas

City State Zip Code
Phoenix AZ 85002

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

Name of Employer Blue Cross and Blue Shield of Arizona
Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
12 / 18 / 2008

Transaction ID: SA11AI.9231

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Mr. daniel aspery, md

Mailing Address 2444 W. Las Palmaritas

City State Zip Code
Phoenix AZ 85021

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

Name of Employer bcbsaz
Occupation vice president

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
12 / 18 / 2008

Transaction ID: SA11AI.9232

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ▶ **70.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A.	Full Name (Last, First, Middle Initial) Mr. Tony Astorga		Date of Receipt	
	Mailing Address P.O. Box 13466		M M / D D / Y Y Y Y Y 1 2 / 1 8 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.9233
	Phoenix	AZ	85002	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer Blue Cross & Blue Shield of AZ		Occupation Sr. V.P. & CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00		

B.	Full Name (Last, First, Middle Initial) Ms Kathryn Baker		Date of Receipt	
	Mailing Address 2444 W. Las Palmaritas Drive		M M / D D / Y Y Y Y Y 1 2 / 1 8 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.9234
	Phoenix	AZ	85021	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer Blue Cross & Blue Shield of Arizona		Occupation VP & Treasurer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00		

C.	Full Name (Last, First, Middle Initial) Mr. Richard Boals		Date of Receipt	
	Mailing Address 2444 W. Las Palmaritas Drive		M M / D D / Y Y Y Y Y 1 2 / 1 8 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.9240
	Phoenix	AZ	85021	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer Blue Cross & Blue Shield of Arizona		Occupation President & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00		

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A. Full Name (Last, First, Middle Initial)
Ms Susan Broadman

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
Phoenix AZ 85021

FEC ID number of contributing federal political committee. C

Name of Employer: Blue Cross & Blue Shield of Arizona Occupation: Staffing Specialist/EEO Coordinator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt MM / DD / YYYY
12 / 18 / 2008

Transaction ID: SA11AI.9242

Amount of Each Receipt this Period 30.00

B. Full Name (Last, First, Middle Initial)
Mr. James Brutlag

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
Phoenix AZ 85021

FEC ID number of contributing federal political committee. C

Name of Employer: Blue Cross & Blue Shield of Arizona Occupation: V.P.-Underwriting & Actuarial Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt MM / DD / YYYY
12 / 18 / 2008

Transaction ID: SA11AI.9243

Amount of Each Receipt this Period 40.00

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

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

FEC ID number of contributing federal political committee. C

Name of Employer: BCBSAZ Occupation: Actuarial

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt MM / DD / YYYY
12 / 18 / 2008

Transaction ID: SA11AI.9244

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) 120.00

TOTAL This Period (last page this line number 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 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

<p>A. Full Name (Last, First, Middle Initial) Mrs. Helen Chandler</p> <p>Mailing Address 2444 W. Las Palmaritas Drive</p> <p>City State Zip Code Phoenix AZ 85021</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Blue Cross & Blue Shield of Arizona</p> <p>Occupation Sr. V.P.-Claims & Federal Programs</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 600.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 8 / 2 0 0 8</p> <p>Transaction ID: SA11AI.9246</p> <p>Amount of Each Receipt this Period 50.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Lisa Cherney</p> <p>Mailing Address P. O. Box 13466</p> <p>City State Zip Code Phoenix AZ 85002</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSAZ</p> <p>Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 8 / 2 0 0 8</p> <p>Transaction ID: SA11AI.9247</p> <p>Amount of Each Receipt this Period 20.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Kathy Clubine</p> <p>Mailing Address P. O. Box 13466</p> <p>City State Zip Code Phoenix AZ 85002</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBSAZ</p> <p>Occupation mgr</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 360.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 8 / 2 0 0 8</p> <p>Transaction ID: SA11AI.9248</p> <p>Amount of Each Receipt this Period 30.00</p>
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SUBTOTAL of Receipts This Page (optional)	100.00
TOTAL This Period (last page this line number 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 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A. Full Name (Last, First, Middle Initial)
linda douglas
Mailing Address P. O. Box 13466
City Phoenix State AZ Zip Code 85002
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSAZ Occupation staff
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 12 / 18 / 2008
Transaction ID: SA11AI.9253
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Gerry Farmer
Mailing Address P. O. Box 13466
City Phoenix State AZ Zip Code 85002
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSAZ Occupation director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 12 / 18 / 2008
Transaction ID: SA11AI.9257
Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Terri Gades
Mailing Address P. O. Box 13466
City Phoenix State AZ Zip Code 85002
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSAZ Occupation director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 12 / 18 / 2008
Transaction ID: SA11AI.9259
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00
TOTAL This Period (last page this line number 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 / 21
(check only one)

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

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NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)
Barbara Guerriero

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer BCBSAZ Occupation vice president

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.9262

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Mr. Richard Hannon

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
Phoenix AZ 85021

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

Name of Employer Blue Cross & Blue Shield of Arizona Occupation Sr. V.P.-External Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.9264

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Mr. Christopher Hogan

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
Phoenix AZ 85002

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

Name of Employer Blue Cross and Blue Shield of Arizona Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.9266

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

TOTAL This Period (last page this line number 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 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)

Cathy Huskey

Mailing Address 2444 West Las Palmaritas Drive

City State Zip Code
Phoenix AZ 85021

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSAZ

Occupation
director

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.9267

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Bonnie Irwin

Mailing Address 2444 W. Las Palmaritas

City State Zip Code
Phoenix AZ 85021

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSAZ

Occupation
vice president

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.9268

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Sheri Jackson

Mailing Address 2444 W Las Palmaritas

City State Zip Code
Phoenix AZ 85021

FEC ID number of contributing federal political committee.

C

Name of Employer
BCBSAZ

Occupation
vice president

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.9270

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number 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 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A. Full Name (Last, First, Middle Initial)
Ms Mary Sue Jacobs

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
Phoenix AZ 85021

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

Name of Employer Occupation
Blue Cross & Blue Shield of Arizona Sr. Tech. Support Analyst

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	8	/	2	0	0	8

Transaction ID: SA11AI.9269

Amount of Each Receipt this Period
20.00

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

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer Occupation
BCBSAZ

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	8	/	2	0	0	8

Transaction ID: SA11AI.9273

Amount of Each Receipt this Period
20.00

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

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
Phoenix AZ 85021

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

Name of Employer Occupation
BCBSAZ vice president

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	8	/	2	0	0	8

Transaction ID: SA11AI.9274

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► 70.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A. Full Name (Last, First, Middle Initial)
Robyn Mauser

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer BCBSAZ Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.9277

Amount of Each Receipt this Period
20.00

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

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer BCBSAZ Occupation
vice president

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.9278

Amount of Each Receipt this Period
30.00

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

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer BCBSAZ Occupation
manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.9279

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 70.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A. Full Name (Last, First, Middle Initial)
elizabeth messina

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer BCBSAZ Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
840.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	8	/	2	0	0	8

Transaction ID: SA11AI.9282

Amount of Each Receipt this Period
70.00

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

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer BCBSAZ Occupation Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	8	/	2	0	0	8

Transaction ID: SA11AI.9283

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Mrs. Jody Miller

Mailing Address 2444 W. Las Palmaritas

City State Zip Code
Phoenix AZ 85002

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

Name of Employer Blue Cross and Blue Shield of Arizona Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	8	/	2	0	0	8

Transaction ID: SA11AI.9284

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **120.00**

TOTAL This Period (last page this line number 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 / 21
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)
Cindy Montgomery

Mailing Address P. O. box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer bcbsaz Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
12 / 18 / 2008

Transaction ID: SA11AI.9285

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Susan Nash

Mailing Address 2444 W. Las Palmaritas Drive

City State Zip Code
Phoenix AZ 85021

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

Name of Employer Blue Cross & Blue Shield of Arizona Occupation V.P.-Federal Programs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
12 / 18 / 2008

Transaction ID: SA11AI.9288

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Susan Navran

Mailing Address 2444 W. Las Palmaritas

City State Zip Code
Phoenix AZ 85002

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

Name of Employer Blue Cross and Blue Shield of Arizona Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
12 / 18 / 2008

Transaction ID: SA11AI.9289

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ▶ 70.00

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

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

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

FOR LINE NUMBER: PAGE 17 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A. Full Name (Last, First, Middle Initial)
robert nenad

Mailing Address P. O. BOX 13466

City State Zip Code
PHOENIX AZ 85002

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

Name of Employer BCBSAZ Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	8	/	2	0	0	8

Transaction ID: SA11AI.9290

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Marty O'Reilly

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer BCBSAZ Occupation
Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	8	/	2	0	0	8

Transaction ID: SA11AI.9293

Amount of Each Receipt this Period
20.00

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

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer BCBSAZ Occupation
manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	8	/	2	0	0	8

Transaction ID: SA11AI.9294

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **60.00**

TOTAL This Period (last page this line number 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 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)

Linda Olvey

Mailing Address P. O. box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer Occupation
bcbsaz

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.9295

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)

Pam Ray

Mailing Address 2444 W. Las Palmaritas

City State Zip Code
Phoenix AZ 85021

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

Name of Employer Occupation
BCBSAZ vice president

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.9300

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)

Adam Rice

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer Occupation
BCBSAZ director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.9301

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ▶

70.00

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

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

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

FOR LINE NUMBER: PAGE 19 / 21
(check only one)

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

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NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)
Deanna Salazar

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer BCBSAZ Occupation vice president

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.9303

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
debbie scoles

Mailing Address p. o. box 13466

City State Zip Code
phoenix AZ 85002

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

Name of Employer bcbsaz Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.9304

Amount of Each Receipt this Period
20.00

C.

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

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer BCBSAZ Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.9305

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► 100.00

TOTAL This Period (last page this line number 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 / 21
(check only one)

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

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NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A.

Full Name (Last, First, Middle Initial)
Scott Sowell

Mailing Address P O Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer BCBSAZ Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.9310

Amount of Each Receipt this Period
20.00

B.

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

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer bcbsaz Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.9309

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Su Tucker

Mailing Address P. O. Box 13466

City State Zip Code
Phoenix AZ 85002

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

Name of Employer BCBSAZ Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.9312

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► 70.00

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

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

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

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NAME OF COMMITTEE (In Full)
Healthy Government Committee-The Political Action Committee of BCBSAZ

A.	Full Name (Last, First, Middle Initial) Mrs. Carol Von Fange		Date of Receipt
	Mailing Address 2444 W. Las Palmaritas		<input type="text" value="12"/> <input type="text" value="18"/> <input type="text" value="2008"/>
	City	State	Zip Code
	Phoenix	AZ	85002
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross and Blue Shield of Arizona		Occupation Manager	Transaction ID: SA11AI.9313
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="240.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="20.00"/>

B.	Full Name (Last, First, Middle Initial) Mike Woodard		Date of Receipt
	Mailing Address 2444 W. Las Palmaritas		<input type="text" value="12"/> <input type="text" value="18"/> <input type="text" value="2008"/>
	City	State	Zip Code
	Phoenix	AZ	85002
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blue Cross Blue Shield of AZ		Occupation Director	Transaction ID: SA11AI.9318
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="240.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="20.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="40.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1340.00"/>