Image# 201907169151361885			_		PAGE 1 / 22
	PORT OF R ND DISBURS Other Than An Autho	EMENT	s	045-22	
1. NAME OF TYP	E OR PRINT ▼	Example: If typi	ing type		Jse Only
COMMITTEE (in full)		over the lines.		12FE4M5	
Louisiana Health Service	& Indemnity Compa	ny DBA Blue	Cross & E	Blue Shield of L	ouisiana PAC
ADDRESS (number and street)	525 Reitz Avenue				
Check if different					
than previously reported. (ACC)	Baton Rouge			LA 7080	9
2. FEC IDENTIFICATION NUMB	ER V CITY		S	TATE 🔺	ZIP CODE
C C00651265	3. IS T REF	~	NEW (N) OR	AMENDED (A)	
(Choose One)	b) Monthly Report Due On: Mar 20		May 20 (M5) Jun 20 (M6)	Aug 20 (M8) Sep 20 (M9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election
(a) Quarterly Reports:	Apr 20	(M4)	Jul 20 (M7)	Oct 20 (M10)	Year Only)
April 15 Quarterly Report (Q1)	(c) 12-Day	Primary (12	P)	General (12G)	Runoff (12R)
July 15 Quarterly Report (Q2)	PRE-Election Report for the:	Convention	(12C)	Special (12S)	_
October 15 Quarterly Report (Q3)		M M /		/ Y Y Y	in the
January 31 Year-End Report (YE)	Election o	on			State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST -Election Report for the:	General (30	G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Election	on/		Y Y Y Y	in the State of
5. Covering Period	01 / Y Y Y Y 01 2019	through	06		Y Y 119
I certify that I have examined this R C Type or Print Name of Treasurer	eport and to the best of my Camerlinck, Bryan, , ,	y knowledge and	belief it is true	e, correct and comple	ete.
Signature of Treasurer	k, Bryan, , ,	[Electronical	ly Filed] Da		6 / Y Y Y Y Y 2019
NOTE: Submission of false, erroneous	, or incomplete information n	nay subject the per	rson signing this	s Report to the penal	ies of 52 U.S.C. § 30109
Office Use Only					C FORM 3X Rev. 05/2016

07/16/2019 10 : 38

x

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Louisiana Health Serv	vice & Ind	lemnity C	Compar	ny DBA Blue	Cross & Blue	e Shield	of Louis	iana PAC
Report Covering the Period:	From:	м м / 01	01	/ Y Y Y Y 2019	To:		30	2019

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2019		30763.26
	(b) Cash on Hand at Beginning of Reporting Period	30763.26	
	(c) Total Receipts (from Line 19)	9201.13	9201.13
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	39964.39	39964.39
-	Total Disbursements (from Line 31)	0.00	0.00
	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	39964.39	39964.39
	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
).	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Report Covering the Period: From: 01	04 0040	o: 06 30 2019
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 11. Contributions (other than loans) From: (a) Individuals/Persons Other 		
Than Political Committees (i) Itemized (use Schedule A)	5090.28	5090.28
(ii) Unitemized (iii) TOTAL (add	4110.85	4110.85
Lines 11(a)(i) and (ii)	9201.13	9201.13
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(such as PACs) (d) Total Contributions (add Lines	0.00	0.00
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	9201.13	9201.13
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received15. Offsets To Operating Expenditures(Defunde Defector at)	0.00	0.00
(Refunds, Rebates, etc.)(Carry Totals to Line 37, page 5)16. Refunds of Contributions Madeto Federal Candidates and Other	0.00	0.00
Political Committees	0.00	0.00
 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 	0.00	0.00
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
 Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 	9201.13	9201.13
20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶	9201.13	9201.13

I

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 4
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated 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
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures		
(use Schedule E) Coordinated Party Expenditures (52 U.S.C. § 30116(d))	0.00	0.00
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made Refunds of Contributions To:	0.00	0.00
(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
Other Disbursements (Including Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 301 (a) Allocated Federal Election Activity (from Schedule H6)	01(20))	
(i) Federal Share	0.00	0.00
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00
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
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0.00	0.00
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	• 0.00	0.00

L

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Total Contributions (other than loans) (from Line 11(d), page 3) 	9201.13	9201.13
 Total Contribution Refunds (from Line 28(d)) 	0.00	0.00
 Net Contributions (other than loans) (subtract Line 34 from Line 33) 	9201.13	9201.13
 Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) 	0.00	0.00
 Offsets to Operating Expenditures (from Line 15, page 3) 	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 OF 22 (check only one)			
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
or for commercial purposes, other than using t			erson for the purpose of soliciting contributions to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Louisiana Health Service & In	demnity Co	ompany DBA Blue Cros	ss & Blue Shield of Louisiana PAC			
Full Name of Individual (Last, First, Middle Barfield, Deirdre, , ,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 715 Coachlight Road City	State	Zip Code	03 13 2019 Transaction ID : SA11AI.5003			
Shreveport	LA	71106	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		250.00			
Name of Employer (for Individual) LHSIC		upation (for Individual) ior Medical Director	Memo Item			
Receipt For:	Aggregate	Year-to-Date ▼				
Primary General Other (specify) ▼		250.00				
Full Name of Individual (Last, First, Middle Bourgeois, Tina, , ,	·	Prganization Name	Date of Receipt			
Mailing Address 19425 Creek Round Avenue			05 / D D / Y Y Y Y 05 15 2019			
City Baton Rouge	State Zip Code LA 70817		Transaction ID : SA11AI.5148			
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period			
Name of Employer (for Individual) LHSIC		upation (for Individual) erprise Info Mgmt	PR Ded			
Receipt For: 2020	Aggregate	Year-to-Date ▼				
★ Primary General Other (specify) ▼		208,40	1			
Full Name of Individual (Last, First, Middle Bourgeois, Tina, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bourgeois, Tina, , ,					
	Mailing Address 19425 Creek Round Avenue					
City Baton Rouge	State LA	Zip Code 70817	Transaction ID : SA11AI.5181 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		20.84			
Name of Employer (for Individual) LHSIC		upation (for Individual) erprise Info Mgmt	PR Ded			
Receipt For: 2020 Primary General Other (specify)	Aggregate	Year-to-Date 229.24				
SUBTOTAL of Receipts This Page (optional).		•••••	291.68			
TOTAL This Period (last page this line number	er only)					

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 OF 22		
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) ✗ 11a 11b 11c 12 13 14 15 16 17		
or for commercial purposes, other than using			person for the purpose of soliciting contributions ee to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) Louisiana Health Service &	Indemnity Co	ompany DBA Blue Cro	oss & Blue Shield of Louisiana PAC		
Full Name of Individual (Last, First, Mide Bourgeois, Tina, , ,		Date of Receipt			
Mailing Address 19425 Creek Round Av	06 30 2019				
City Baton Rouge	State LA	Zip Code 70817	Transaction ID : SA11AI.5214		
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period		
Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item		
LHSIC	Ente	erprise Info Mgmt	PR Ded		
Receipt For: 2020	Aggregate	Year-to-Date ▼ 250.08]		
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Faulk, Sheldon, , ,				
Mailing Address 1618 St. Albans	Date of Receipt				
City	State	Zip Code	03 15 2019 Transaction ID : SA11AI.4966		
Baton Rouge	LA	70810	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		41.67		
Name of Employer (for Individual) LHSIC		upation (for Individual) 9 Governmental Affairs	PR Ded		
Receipt For: 2020	Aggregate	Year-to-Date ▼ 208.35]		
Full Name of Individual (Last, First, Mide C. Faulk, Sheldon, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Faulk, Sheldon,				
Mailing Address 1618 St. Albans			03 31 2019		
City Baton Rouge	State LA	Zip Code 70810	Transaction ID : SA11AI.5013 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		41.67		
Name of Employer (for Individual) LHSIC		upation (for Individual) Governmental Affairs	PR Ded		
Receipt For: 2020 Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.02]		
SUBTOTAL of Receipts This Page (option	nal)		▶ 104.18		

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

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 OF 22 (check only one)
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			
NAME OF COMMITTEE (In Full) Louisiana Health Service & In	demnity Co	ompany DBA Blue Cros	ss & Blue Shield of Louisiana PAC
Full Name of Individual (Last, First, Middle Faulk, Sheldon, , , Mailing Address 1618 St. Albans	Initial) or Full O	rganization Name	Date of Receipt
City	State	Zip Code	04 15 2019 Transaction ID : SA11AI.5048
Baton Rouge FEC ID number of contributing		70810	Amount of Each Receipt this Period 41.67
federal political committee.	C	upation (for Individual)	Memo Item
LHSIC Receipt For: 2020	SVF	P Governmental Affairs	PR Ded
	Aggregate	Year-to-Date ▼ 291.69	
Full Name of Individual (Last, First, Middle Faulk, Sheldon , , ,	Date of Receipt		
Mailing Address 1618 St. Albans	Ototo	Zin Oode	04 / D D / Y Y Y Y 2019
City Baton Rouge	StateZip CodeLA70810		Transaction ID : SA11AI.5081 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		41.67
Name of Employer (for Individual) LHSIC		upation (for Individual) P Governmental Affairs	PR Ded
Receipt For: 2020	Aggregate	Year-to-Date ▼ 333.36	
Full Name of Individual (Last, First, Middle Faulk, Sheldon, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 1618 St. Albans		05 / 15 / Y Y Y Y 05 15	
City Baton Rouge	State LA	Zip Code 70810	Transaction ID : SA11AI.5116 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.67
Name of Employer (for Individual) LHSIC		upation (for Individual) Governmental Affairs	PR Ded
Receipt For: 2020 Primary General Other (specify)	Aggregate	Year-to-Date ▼ 375.03	
SUBTOTAL of Receipts This Page (optional).		•	125.01
TOTAL This Period (last page this line number	er only)		

FOR LINE NUMBER:

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22

IT	TEMIZED RECEIPTS			for each category of the Detailed Summary Page	`	hck only one) 11a 11b 11a 11b 13 14 15 16
	y information copied from such Reports and Sta for commercial purposes, other than using the					or the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Louisiana Health Service & Inde	mnity Co	om	pany DBA Blue Cros	s &	Blue Shield of Louisiana PAC
Α.	Full Name of Individual (Last, First, Middle Initia Faulk, Sheldon, , ,	al) or Full O	rgai	nization Name		Date of Receipt
	Mailing Address 1618 St. Albans		05 / 15 / Y Y Y Y 05 15 2019			
	City Baton Rouge	State LA		Zip Code 70810	-	Transaction ID : SA11AI.5149 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	l			41.67
	Name of Employer (for Individual)	Осси	upat	tion (for Individual)	-	Memo Item
			SVP Governmental Affairs			R Ded
	Receipt For: 2020	Aggregate	Yea	ar-to-Date 🔻		
	Other (specify) ▼		,	416.70		
B	Full Name of Individual (Last, First, Middle Initia Faulk, Sheldon, , ,	ſ	Date of Receipt			
5.	Mailing Address 1618 St. Albans		M M / D D / Y Y Y Y 06 15 2019			
	City	State				Transaction ID : SA11AI.5182
	Baton Rouge	LA	70810			Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	_			41.67
	Name of Employer (for Individual) LHSIC		•	tion (for Individual) overnmental Affairs	PF	R Ded
	Receipt For: 2020	Aggregate	Yea	ar-to-Date 🔻		
	★ Primary General Other (specify) ▼		458.37			
С.	Full Name of Individual (Last, First, Middle Initia Faulk, Sheldon, , ,	al) or Full O	rgai	nization Name		Date of Receipt
	Mailing Address 1618 St. Albans					06 30 2019
	City Baton Rouge	State LA		Zip Code 70810		Transaction ID : SA11AI.5215
	FEC ID number of contributing	C	-		_	Amount of Each Receipt this Period 41.67
	federal political committee.	U				
	Name of Employer (for Individual) LHSIC		•	tion (for Individual) vernmental Affairs	P	R Ded
	Receipt For: 2020 r Primary General Other (specify) Other	Aggregate	Yea	ar-to-Date ▼ 500.04		
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number o			F		125.01

FOR LINE NUMBER:

PAGE 10 OF

22

IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) Louisiana Health Service & Inder	mnity Co	mpany DBA Blue Cros	ss & Blue Shield of Louisiana PAC
Α.	Full Name of Individual (Last, First, Middle Initia Greig, Jerome, K, , Mailing Address 120 Peck Blvd			Date of Receipt
	City Lafayette	State Zip Code LA 70508		Transaction ID : SA11AI.5004
	FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period
	Name of Employer (for Individual)		pation (for Individual)	Memo Item
	LHSIC Receipt For:		rd of Directors Member	Check
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
в.	Full Name of Individual (Last, First, Middle Initia Hochheiser, David, , ,	Date of Receipt		
	Mailing Address 218 E. Greens Drive			03 15 2019
	City	State	Zip Code	Transaction ID : SA11AI.4992
	Baton Rouge	LA	70810	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) LHSIC		upation (for Individual) - Medical Economics	PR Ded
	Receipt For: 2020 ✓ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
<u></u>	Full Name of Individual (Last, First, Middle Initia Hochheiser, David, , ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 218 E. Greens Drive	03 31 2019		
	City Baton Rouge	State LA	Zip Code 70810	Transaction ID : SA11AI.5035 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual) LHSIC		ipation (for Individual) - Medical Economics	PR Ded
	Receipt For: 2020 Primary General Other (specify)	Aggregate	Year-to-Date ▼ 300.00	
s	UBTOTAL of Receipts This Page (optional)		•	350.00
т	OTAL This Period (last page this line number o	nly)	••••••	

FOR LINE NUMBER:

PAGE 11 OF

22

IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) Image: 11 to 12 to 13 to 14 to 15 to 16 to 17 to 17 to 18 to 1
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full) Louisiana Health Service & Inder	nnity Co	mpany DBA Blue Cros	ss & Blue Shield of Louisiana PAC
Α.	Full Name of Individual (Last, First, Middle Initia Hochheiser, David, , , Mailing Address 218 E. Greens Drive	I) or Full Or	ziganization Name	Date of Receipt
	Baton Rouge	LA	70810	Transaction ID : SA11AI.5069 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual)		pation (for Individual)	Memo Item
	LHSIC	CVP	- Medical Economics	PR Ded
	Receipt For: 2020 ✓ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Р	Full Name of Individual (Last, First, Middle Initia Hochheiser, David, , ,	l) or Full Or	ganization Name	Data of Doopint
в.	Mailing Address 218 E. Greens Drive	Date of Receipt		
	City	State	Zip Code	Transaction ID : SA11AI.5104
	Baton Rouge	LA	70810	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) LHSIC		pation (for Individual) - Medical Economics	PR Ded
	Receipt For: 2020 ✓ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00	
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Hochheiser, David, , ,	l) or Full Or	ganization Name	Date of Receipt
	Mailing Address 218 E. Greens Drive	05 / D D / Y Y Y Y 2019		
	City Baton Rouge	State LA	Zip Code 70810	Transaction ID : SA11AI.5137 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual) LHSIC		pation (for Individual) - Medical Economics	PR Ded
	Receipt For: 2020 Primary General Other (specify)	Aggregate	Year-to-Date ▼ 450.00	
s	UBTOTAL of Receipts This Page (optional)			150.00
т	OTAL This Period (last page this line number or	1ly)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)		NE NUMBER:	PAGE 12 OF 22
ITEMIZED RECEIPTS			for each category of the	(check	only one) a 11b	11c 12
			Detailed Summary Page			
	ny information copied from such Reports and Sta					soliciting contributions
or	for commercial purposes, other than using the	name and a	ddress of any political committee	e to solicit	contributions fr	om such committee.
$ \rangle$	NAME OF COMMITTEE (In Full) Louisiana Health Service & Inder	mnity Co	mnany DBA Blue Cro	ss & Rli	ue Shield c	of Louisiana PAC
\backslash						
Α.	Full Name of Individual (Last, First, Middle Initia Hochheiser, David, , ,	al) or Full O	rganization Name	Detr	e of Receipt	
А.	Mailing Address 218 E. Greens Drive			_		
					05 15	2019
	City	State	Zip Code	Tra	ansaction ID : S	SA11AI.5170
	Baton Rouge	LA	70810	Amo	ount of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	С				50.00
	Name of Employer (for Individual)	Occi	upation (for Individual)	- П	Memo Item	
	LHSIC	CVF	P - Medical Economics	PR D	ed	
	Receipt For: 2020	Aggregate	Year-to-Date 🔻			
	Primary General		500.00	1		
	Other (specify) v	<u> </u>	500.00			
В.	Full Name of Individual (Last, First, Middle Initia Hochheiser, David, , ,	al) or Full O	rganization Name	Date	e of Receipt	
	Mailing Address 218 E. Greens Drive				M / D D	/ Y Y Y Y
	City State Zip Code				06 15	2019
	Baton Rouge	LA	70810		ansaction ID : S	SA11AI.5203 eceipt this Period
	FEC ID number of contributing					
	federal political committee.	C				50.00
	Name of Employer (for Individual)	Occ	upation (for Individual)	- 0	Memo Item	
	LHSIC	CVP - Medical Economics			ed	
	Receipt For: 2020	Aggregate	Year-to-Date V			
	★ Primary General Other (specify) ▼		550.00			
<u>с</u>	Full Name of Individual (Last, First, Middle Initia Hochheiser, David, , ,	al) or Full O	rganization Name	Date	e of Receipt	
	Mailing Address 218 E. Greens Drive			М	M / D D	/
	City	State	Zip Code)6 30	2019
	City Baton Rouge	State LA	70810		ansaction ID :	Exercipe this Period
	FEC ID number of contributing	С				
	federal political committee.				50.00	
	Name of Employer (for Individual)		upation (for Individual)		Memo Item	
	LHSIC		- Medical Economics	PR D	led	
	Receipt For: 2020	Aggregate	Year-to-Date ▼			
	Other (specify)		600.00			
				<u> </u>		
						150.00
S	SUBTOTAL of Receipts This Page (optional)		••••••		,	150.00
1						

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

FOR LINE NUMBER:

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22

ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full) Louisiana Health Service & Inder	nnity Co	mpany DBA Blue Cros	ss & Blue Shield of Louisiana PAC
Α.	Full Name of Individual (Last, First, Middle Initia Keller, Brian, , , Mailing Address 1068 Cyril Ave.	ll) or Full Oi	ganization Name	Date of Receipt
	0.1	03 08 2019		
	City Baton Rouge	State LA	Zip Code 70806	Transaction ID : SA11AI.5008
	Baton Kouge		70800	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	LHSIC	SVP	& Chief Marketing Officer	check
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General			1
	Other (specify)		1166.68	
в.	Full Name of Individual (Last, First, Middle Initia Keller, Brian, , ,	ll) or Full Oi	ganization Name	Date of Receipt
	Mailing Address 1068 Cyril Ave.	03 15 2019		
	City	State	Zip Code	Transaction ID : SA11AI.4970
	Baton Rouge	LA	70806	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) LHSIC		pation (for Individual)	PR Ded
	Receipt For: 2020	Aggregate	Year-to-Date 🔻	
	✔ Primary General Other (specify) ▼		, 1208.35]
с.	Full Name of Individual (Last, First, Middle Initia Keller, Brian, , ,	ll) or Full Oi	ganization Name	Date of Receipt
	Mailing Address 1068 Cyril Ave.	03 / D D / Y Y Y Y 2019		
	City Reter Deure	State LA	Zip Code	Transaction ID : SA11AI.5017
	Baton Rouge	LA	70806	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) LHSIC		pation (for Individual) & Chief Marketing Officer	PR Ded
	Receipt For: 2020 Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1250.02]
	UBTOTAL of Receipts This Page (optional)			1083.34

FEC Schedule A (Form 3X) Rev. 06/2016

FOR LINE NUMBER:

PAGE 14 OF

22

ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	(check only one) ▼ 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full) Louisiana Health Service & Inder	nnity Co	mpany DBA Blue Cros	ss & Blue Shield of Louisiana PAC
Α.	Full Name of Individual (Last, First, Middle Initia Keller, Brian, , , Mailing Address 1068 Cyril Ave.	l) or Full Or	ganization Name	Date of Receipt
	City	State	Zip Code	Transaction ID : SA11AI.5052
	Baton Rouge	LA	70806	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	LHSIC	SVP	& Chief Marketing Officer	PR Ded
	Receipt For: 2020	Aggregate	Year-to-Date 🔻	
	✔ Primary General Other (specify) ▼		1291.69	
B.	Full Name of Individual (Last, First, Middle Initia Keller, Brian, , ,	l) or Full Or	ganization Name	Date of Receipt
	Mailing Address 1068 Cyril Ave.	04 30 2019		
	City	State	Zip Code	Transaction ID : SA11AI.5085
	Baton Rouge	LA	70806	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) LHSIC		pation (for Individual)	PR Ded
	Receipt For: 2020 ✓ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1333.36	
с.	Full Name of Individual (Last, First, Middle Initia Keller, Brian, , ,	l) or Full Or	ganization Name	Date of Receipt
	Mailing Address 1068 Cyril Ave.			05 15 2019
	City Baton Rouge	State LA	Zip Code 70806	Transaction ID : SA11AI.5120
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) LHSIC		pation (for Individual) & Chief Marketing Officer	PR Ded
	Receipt For: 2020 Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1375.03	
	UBTOTAL of Receipts This Page (optional)			125.01

SCHEDULE A (FEC Form 3X)			Llos constato achadula(a)			NUMBER:	PAGE 15 OF 22	
ITEMIZED RECEIPTS			1	Use separate schedule(s) for each category of the	`_	eck only	— ´ г	
				Detailed Summary Page	×	11a 13	11b	11c 12 15 16 17
Ar	ny information copied from such Reports and Sta	atements ma	av r	not be sold or used by any pe	erson f	-		
	for commercial purposes, other than using the							
\setminus	NAME OF COMMITTEE (In Full)							
$ \rangle$	Louisiana Health Service & Inder	mnity Co	om	pany DBA Blue Cros	s &	Blue	Shield o	of Louisiana PAC
Z	Full Name of Individual (Last, First, Middle Initia	al) or Full O	Iraa	nization Name				
Α.			nga			Date of	Receipt	
	Mailing Address 1068 Cyril Ave.		M M	/ D D	/ Y Y Y Y Y			
							15	2019
	City Baton Rouge	State LA		Zip Code 70806				SA11AI.5153
	U			70000	_	Amount	of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	С						41.67
	Name of Employer (for Individual)	Осси	upa	tion (for Individual)		Me	mo Item	
	LHSIC	SVF	×.	Chief Marketing Officer	P	R Ded		
	Receipt For: 2020	Aggregate	Yea	ar-to-Date 🔻				
	Primary General			1416.70				
	Other (specify) ▼		7	1410.70				
в.	Full Name of Individual (Last, First, Middle Initia Keller, Brian, , ,	al) or Full O	rga	nization Name		Date of	Receipt	
	Mailing Address 1068 Cyril Ave.						/ D D 15	/ Y Y Y Y Y 2019
	City	State		Zip Code	-	06 T rong of		
	Baton Rouge	LA		70806				SA11AI.5186 eceipt this Period
	FEC ID number of contributing							
	federal political committee.	С						41.67
	Name of Employer (for Individual)		•	tion (for Individual)	٦.		mo Item	
	LHSIC	SVF	⊃ &	Chief Marketing Officer	P	R Ded		
	Receipt For: 2020	Aggregate	Yea	ar-to-Date ▼	.			
	Other (specify) ▼		Å	1458.37				
			-)-					
C.	Full Name of Individual (Last, First, Middle Initia Keller, Brian, , ,	al) or Full O	rga	nization Name		Date of	Receipt	
	Mailing Address 1068 Cyril Ave.					M	/ D D	/ Y Y Y Y
	City	State		Zip Code	_	06 Trance	30	2019 SA11AI.5219
	Baton Rouge	LA		70806				eceipt this Period
	FEC ID number of contributing							
	federal political committee.	С	-				41.67	
	Name of Employer (for Individual)		•	tion (for Individual)	\neg		mo Item	
	LHSIC	SVP	° & (Chief Marketing Officer	_ P	R Ded		
	Receipt For: 2020	Aggregate	Yea	ar-to-Date 🔻	_			
	Cher (specify)			1500.04				
			7					
s	UBTOTAL of Receipts This Page (optional)			••••••			y	125.01
					· i			

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

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 16 OF 22		
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) ✗ 11a 11b 11c 12 13 14 15 16 11		
			person for the purpose of soliciting contributions be to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) Louisiana Health Service & I	ndemnity Co	ompany DBA Blue Cro	oss & Blue Shield of Louisiana PAC		
Full Name of Individual (Last, First, Middl Laird, Gina, , ,	e Initial) or Full O	rganization Name	Date of Receipt		
Mailing Address 11019 Fernbrook Ave			04 01 / Y Y Y Y Y		
City Baton Rouge	State LA	Zip Code 70809	Transaction ID : SA11AI.5043		
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item		
LHSIC	SVF	P Benefit Operations	Check		
Receipt For:	Aggregate	Year-to-Date ▼	_		
Other (specify) V		1000.00			
Full Name of Individual (Last, First, Middl 3. Langlois, Darrell, , ,	e Initial) or Full O	rganization Name	Date of Receipt		
Mailing Address 42037 Bang Ficklin Road	M M / D D / Y Y Y Y				
City	State	Zip Code	03 15 2019		
Prairieville	LA	70769	Transaction ID : SA11AI.4972 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		42.00		
Name of Employer (for Individual) LHSIC		upation (for Individual) iness Dev & Strategy	PR Ded		
Receipt For: 2020	Aggregate	Year-to-Date ▼			
✔ Primary General Other (specify) ▼		210.00			
Full Name of Individual (Last, First, Middl Langlois, Darrell, , ,	e Initial) or Full O	rganization Name	Date of Receipt		
Mailing Address 42037 Bang Ficklin Road			03 31 2019		
City	State	Zip Code	Transaction ID : SA11AI.5019		
Prairieville	LA	70769	Amount of Each Receipt this Period		
federal political committee.	EC ID number of contributing ederal political committee.				
Name of Employer (for Individual) LHSIC		upation (for Individual) ness Dev & Strategy	PR Ded		
Receipt For: 2020 Primary General Other (specify)	Aggregate	Year-to-Date ▼ 252.00			
SUBTOTAL of Receipts This Page (optional	l)		▶ 1084.00		

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

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 17 OF 22 (check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full)	demnity Co	ompany DBA Blue Cros	ss & Blue Shield of Louisiana PAC
Full Name of Individual (Last, First, Middle I Langlois, Darrell, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 42037 Bang Ficklin Road	State	Zip Code	04 15 2019 Transaction ID : SA11AI.5054
Prairieville	LA	70769	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.00
Name of Employer (for Individual) LHSIC		upation (for Individual) iness Dev & Strategy	PR Ded
Receipt For: 2020 ✓ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 294.00	
Full Name of Individual (Last, First, Middle I B. Langlois, Darrell, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 42037 Bang Ficklin Road			04 / D D / Y Y Y Y 04 30 2019
City Prairieville	State LA	Zip Code 70769	Transaction ID : SA11AI.5087 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.00
Name of Employer (for Individual) LHSIC		upation (for Individual) iness Dev & Strategy	PR Ded
Receipt For: 2020	Aggregate	Year-to-Date ▼ 336.00	
Full Name of Individual (Last, First, Middle I Langlois, Darrell, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 42037 Bang Ficklin Road			05 / D D / Y Y Y Y 05 / 15 / 2019
City Prairieville	State LA	Zip Code 70769	Transaction ID : SA11AI.5122 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.00
Name of Employer (for Individual) LHSIC		upation (for Individual) ness Dev & Strategy	PR Ded
Receipt For: 2020 Primary General Other (specify)	Aggregate	Year-to-Date ▼ 378.00	
SUBTOTAL of Receipts This Page (optional)		•	126.00
TOTAL This Period (last page this line numbe	er only)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 OF 22
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using			person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	ndemnity Co	ompany DBA Blue Cro	ess & Blue Shield of Louisiana PAC
Full Name of Individual (Last, First, Middl Langlois, Darrell, , ,		rganization Name	Date of Receipt
Mailing Address 42037 Bang Ficklin Road	05 / D D / Y Y Y Y 05 15 2019		
City Prairieville	State LA	Zip Code 70769	Transaction ID : SA11AI.5155 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.00
Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item
LHSIC	Bus	iness Dev & Strategy	PR Ded
Receipt For: 2020	Aggregate	Year-to-Date ▼ 420.00]
Full Name of Individual (Last, First, Middl B. Langlois, Darrell, , ,	e Initial) or Full O	rganization Name	Date of Descript
Mailing Address 42037 Bang Ficklin Road	Date of Receipt		
City	State	Zip Code	06 15 2019
Prairieville	LA	70769	Transaction ID : SA11AI.5188 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.00
Name of Employer (for Individual) LHSIC		upation (for Individual) iness Dev & Strategy	PR Ded
Receipt For: 2020	Aggregate	Year-to-Date ▼ 462.00]
Full Name of Individual (Last, First, Middl C. Langlois, Darrell, , ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 42037 Bang Ficklin Road	I		06 30 2019
City Prairieville	State LA	Zip Code 70769	Transaction ID : SA11AI.5221 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	42.00	
Name of Employer (for Individual) LHSIC		upation (for Individual) ness Dev & Strategy	PR Ded
Receipt For: 2020 Primary General Other (specify)	Aggregate	Year-to-Date ▼ 504.00]
SUBTOTAL of Receipts This Page (optional	ıl)		126.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

FOR LINE NUMBER:

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22

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11a 11b 12 13 14 15 16 17		
Any information copied from such Reports and Sta or for commercial purposes, other than using the n					
NAME OF COMMITTEE (In Full) Louisiana Health Service & Inder	nnity Co	ompany DBA Blue Cro	ss & Blue Shield of Louisiana PAC		
Full Name of Individual (Last, First, Middle Initia Mayo, Tamara, , , Mailing Address 3235 Grand Way Avenue	l) or Full C	organization Name	Date of Receipt		
City Baton Rouge	State LA	Zip Code 70810	05 15 2019 Transaction ID : SA11AI.5174 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		20.84		
Name of Employer (for Individual) LHSIC Receipt For: 2020	VP	upation (for Individual) - Provider Reimb & Audit	PR Ded		
✔ Primary □ General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.40]		
Full Name of Individual (Last, First, Middle Initia B. Mayo, Tamara, , , Mailing Address 3235 Grand Way Avenue					
City	State	Zip Code	06 15 2019 Transaction ID : SA11AI.5207		
Baton Rouge FEC ID number of contributing federal political committee.	C	70810	Amount of Each Receipt this Period		
Name of Employer (for Individual) LHSIC		upation (for Individual) - Provider Reimb & Audit	PR Ded		
Receipt For: 2020	Aggregate	Year-to-Date 229.24]		
Full Name of Individual (Last, First, Middle Initia Mayo, Tamara, , ,	ll) or Full C	organization Name	Date of Receipt		
Mailing Address 3235 Grand Way Avenue			06 / D D / Y Y Y Y 2019		
City Baton Rouge	State LA	Zip Code 70810	Transaction ID : SA11AI.5240 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		20.84		
		upation (for Individual) · Provider Reimb & Audit	PR Ded		
Receipt For: 2020 Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.08]		
SUBTOTAL of Receipts This Page (optional)			62.52		

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

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FOR LINE NUMBER:

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22

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Louisiana Health Service & Ind	demnity Cor	npany DBA Blue Cros	ss & Blue Shield of Louisiana PAC
Full Name of Individual (Last, First, Middle Miller, Judy, P, , Mailing Address 5203 Raphael Drive City Alexandria FEC ID number of contributing federal political committee. Name of Employer (for Individual) LHSIC Receipt For: Primary General Other (specify) ▼	State LA C Occup Board	Zip Code 71303 Pation (for Individual) I of Directors Member ear-to-Date ▼ 250.00	Date of Receipt
Full Name of Individual (Last, First, Middle B. Odom, Elizabeth, , , Mailing Address 969 Cyril Ave City Baton Rouge FEC ID number of contributing federal political committee. Name of Employer (for Individual) LHSIC Receipt For: Primary General Other (specify) ▼	State LA C Occup Staff	Zip Code 70806 Dation (for Individual) Attorney ear-to-Date 250.00	Date of Receipt
Full Name of Individual (Last, First, Middle Simon, Lawrence, , , Mailing Address 106 Rimwood Avenue City Lafayette FEC ID number of contributing federal political committee. Name of Employer (for Individual) LHSIC Receipt For: 2020 X Primary General Other (specify)	State LA C Occup Lead I	Zip Code 70501 Pation (for Individual) Medical Director ear-to-Date ▼ 208.40	Date of Receipt
SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line number			520.84

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 OF 22 (check only one)	
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)			erson for the purpose of soliciting contributions to solicit contributions from such committee.	
/	-		ss & Blue Shield of Louisiana PAC	
Full Name of Individual (Last, First, Middle Simon, Lawrence, , , Mailing Address 106 Rimwood Avenue	Initial) or Full C	organization Name	Date of Receipt	
City	State	Zip Code	06 15 2019 Transaction ID : SA11AI.5209	
Lafayette	LA	70501	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		20.84	
Name of Employer (for Individual) LHSIC		upation (for Individual) d Medical Director	PR Ded	
Receipt For: 2020	Aggregate	Year-to-Date V		
✔ Primary General Other (specify) ▼		229.24		
Full Name of Individual (Last, First, Middle Simon, Lawrence, , ,	Initial) or Full C	organization Name	Date of Receipt	
Mailing Address 106 Rimwood Avenue			06 30 2019	
City	State	Zip Code	Transaction ID : SA11AI.5242	
	LA	70501	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		20.84	
Name of Employer (for Individual) LHSIC		upation (for Individual) Id Medical Director	PR Ded	
Receipt For: 2020	Aggregate	Year-to-Date V		
★ Primary General Other (specify) ▼		250.08]	
Full Name of Individual (Last, First, Middle . Tipton, Michael, , ,	Initial) or Full C	organization Name	Date of Receipt	
Mailing Address 586 Franklin St.	Mailing Address 586 Franklin St.			
City Baton Rouge	State LA	Zip Code 70806	Transaction ID : SA11AI.5002 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	Occupation (for Individual) Head of Community Relations		250.00	
Name of Employer (for Individual) LHSIC			Check	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00		
SUBTOTAL of Receipts This Page (optional)		••••••	291.68	
TOTAL This Period (last page this line numb	per only)			

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22

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 13 14 15 16 17			
Any information copied from such Reports and or for commercial purposes, other than using th						
NAME OF COMMITTEE (In Full)	lemnity Co	ompany DBA Blue Cro	ss & Blue Shield of Louisiana PAC			
Full Name of Individual (Last, First, Middle Ir A. Walker, Stephen, B, ,	nitial) or Full C	Organization Name	Date of Receipt			
Mailing Address 3267 East Lakeshore Drive						
City Baton Rouge	State LA	Zip Code 70808	Transaction ID : SA11AI.5006 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		250.00			
Name of Employer (for Individual) LHSIC		upation (for Individual) Id Medical Director	Check			
Receipt For: Primary General Other (specify) $ earrow$	Aggregate	Year-to-Date ▼ 250.00]			
Full Name of Individual (Last, First, Middle In B.	nitial) or Full C	Organization Name	Date of Receipt			
Mailing Address	-					
City	State	Zip Code	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С					
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date]			
Full Name of Individual (Last, First, Middle In	nitial) or Full C	Organization Name	Date of Receipt			
Mailing Address						
City	State	Zip Code	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С					
Name of Employer (for Individual)	Name of Employer (for Individual) Occupation (for Individual)					
Receipt For: Primary General Other (specify)	Primary General General					
SUBTOTAL of Receipts This Page (optional)			250.00			
TOTAL This Pariod (last page this line number	r only)		5090.28			

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

FEC Schedule A (Form 3X) Rev. 06/2016

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