

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS
For Other Than An Authorized Committee

RECEIVED

2012 JAN 31 AM 10:21

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M EC MAIL CENTER

BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)

ADDRESS (number and street)

PO BOX 3248

Check if different than previously reported. (ACC)

OMAHA

NE

68124-

FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00276311

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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)
 - Mar 20 (M3)
 - Apr 20 (M4)
 - May 20 (M5)
 - Jun 20 (M6)
 - Jul 20 (M7)
 - Aug 20 (M8)
 - Sep 20 (M9)
 - Oct 20 (M10)
 - Nov 20 (M11) (Non-Election Year Only)
 - Dec 20 (M12) (Non-Election Year Only)
 - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
 - General (12G)
 - Runoff (12R)
 - Convention (12C)
 - Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the:
- General (30G)
 - Runoff (30R)
 - Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period

07 / 01 / 2011

through

12 / 31 / 2011

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

Patrick J. Bourne

Signature of Treasurer

Patrick J. Bourne

Date

01 / 30 / 2012

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

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)

Report Covering the Period: From:

MM ' DD ' YYYY
07 ' 01 ' 2011

To:

MM ' DD ' YYYY
12 ' 31 ' 2011

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, 2011	28,916.70	
(b) Cash on Hand at Beginning of Reporting Period	28,182.86	
(c) Total Receipts (from Line 19)	13,571.95	27,978.10
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	41,754.81	56,894.80
7. Total Disbursements (from Line 31)	10,592.78	25,732.77
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	31,162.03	31,162.03
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)

Report Covering the Period: From: 07' 01' 2011 To: 12' 31' 2011

I. Receipts

**COLUMN A
Total This Period**

**COLUMN B
Calendar Year-to-Date**

	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).....	12,899.84	17,487.26
(ii) Unitemized.....	672.11	10,490.84
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	13,571.95	27,978.10
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)..... ▶	13,571.95	27,978.10
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
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))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	13,571.95	27,978.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	13,571.95	27,978.10

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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

13,571.95
13,571.95
9,278
9,278

27,978.10
27,978.10
23,277
23,277

12030722904

**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 1 OF 16		
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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 NE PAC (BLUEPAC)

A. Full Name (Last, First, Middle Initial) Aman, Karen, B		Date of Receipt 12 / 31 / 2011	
Mailing Address 610 Southfork Road		Amount of Each Receipt this Period 0.00	
City Blair	State Ne	Zip Code 68008	
FEC ID number of contributing federal political committee. C			
Name of Employer Blue Cross Blue Shield of Ne		Occupation Board Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Griess, James, R		Date of Receipt 12 / 31 / 2011	
Mailing Address 8707 NW 70th St		Amount of Each Receipt this Period 0.00	
City Malcolm	State Ne	Zip Code 68402	
FEC ID number of contributing federal political committee. C			
Name of Employer Blue Cross Blue Shield of Ne		Occupation Board Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.00	

C. Full Name (Last, First, Middle Initial) Schumacher, Jeff		Date of Receipt 12 / 31 / 2011	
Mailing Address Po Box 83246		Amount of Each Receipt this Period 0.00	
City Lincoln	State Ne	Zip Code 68501	
FEC ID number of contributing federal political committee. C			
Name of Employer Blue Cross Blue Shield of Ne		Occupation Board Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	0.00

12030722905

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

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NAME OF COMMITTEE (In Full)
BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)

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

Mailing Address
9205 Oak Circle

City **Omaha** State **Ne** Zip Code **68124-8767**

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

Name of Employer **Blue Cross Blue Shield of Ne** Occupation **President + CEO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
19,800.00

Date of Receipt
12 / 31 / 2011

Amount of Each Receipt this Period
9,900.00

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

Mailing Address
205 S 216th Circle

City **Omaha** State **Ne** Zip Code **68022-1823**

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

Name of Employer **Blue Cross Blue Shield of Ne** Occupation **EVP Treasurer + CFO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
77,761

Date of Receipt
12 / 31 / 2011

Amount of Each Receipt this Period
388.80

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

Mailing Address
420 Golden Oaks Drive

City **Council Bluffs** State **IA** Zip Code **51503-8640**

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

Name of Employer **Blue Cross Blue Shield of Ne** Occupation **SVP BUS PROC COOP SVS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt
12 / 31 / 2011

Amount of Each Receipt this Period
330.00

SUBTOTAL of Receipts This Page (optional)..... **17,088.00**

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

12030722906

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 <u>3</u> OF <u>16</u>
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)

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

Mailing Address
1711 N 171 St

City **Omaha** State **Ne** Zip Code **68118-2807**

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

Name of Employer **Blue Cross Blue Shield of Ne** Occupation **VP IS & CIO**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **639.29**

Date of Receipt
12 / 31 / 2011

Amount of Each Receipt this Period
324.06

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

Mailing Address
5611 Leavenworth St

City **Omaha** State **Ne** Zip Code **68106-1235**

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

Name of Employer **Blue Cross Blue Shield of Ne** Occupation **VP OF MED POLICY & MD DIRECTOR**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **609.98**

Date of Receipt
12 / 31 / 2011

Amount of Each Receipt this Period
304.98

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

Mailing Address
9629 Harney Parkway South

City **Omaha** State **Ne** Zip Code **68114-4534**

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

Name of Employer **Blue Cross Blue Shield of Ne** Occupation **EVP & CMO**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **594.00**

Date of Receipt
12 / 31 / 2011

Amount of Each Receipt this Period
297.00

SUBTOTAL of Receipts This Page (optional).....▶ **926.04**

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

12030722907

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

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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)

Full Name (Last, First, Middle Initial)

A. *Kolli, Rama*

Mailing Address

2723 N 191st St

City

Elkhorn

State

Ne

Zip Code

68022-2909

FEC ID number of contributing federal political committee.

C

Date of Receipt

12 / 31 / 2011

Amount of Each Receipt this Period

473.88

Name of Employer

Blue Cross Blue Shield of Ne

Occupation

SR. DIRECTOR IS-ENT. ARCH.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

473.88

Full Name (Last, First, Middle Initial)

B. *Waldman, Sarah*

Mailing Address

2808 Leigh Ln

City

Papillion

State

Ne

Zip Code

68133-3276

FEC ID number of contributing federal political committee.

C

Date of Receipt

12 / 31 / 2011

Amount of Each Receipt this Period

172.00

Name of Employer

Blue Cross Blue Shield of Ne

Occupation

VP ETHICS & BOARD SEC

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

444.19

Full Name (Last, First, Middle Initial)

C. *Jenkins, Thomas*

Mailing Address

12936 Dewey Ave

City

Omaha

State

Ne

Zip Code

68154-2932

FEC ID number of contributing federal political committee.

C

Date of Receipt

12 / 31 / 2011

Amount of Each Receipt this Period

168.23

Name of Employer

Blue Cross Blue Shield of Ne

Occupation

VP LEGAL & GEN COUNSEL

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

425.09

SUBTOTAL of Receipts This Page (optional).....▶

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

814.11

814.11

12030722908

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

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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)

Full Name (Last, First, Middle Initial)

A. BYERS, GERALD

Mailing Address

128 ALLISON AVE

City
PAPILLION

State

NE

Zip Code

68133-4426

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of NE

Occupation

SVP & CHIEF RISK OFFICER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

396.17

Date of Receipt

12 / 31 / 2011

Amount of Each Receipt this Period

396.17

Full Name (Last, First, Middle Initial)

B. WHALEN, TOMMY

Mailing Address

1568 AVIGNON CIRCLE

City
YUTAN

State

NE

Zip Code

68073-3080

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of NE

Occupation

VP HR & CD

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Date of Receipt

12 / 31 / 2011

Amount of Each Receipt this Period

396.00

Full Name (Last, First, Middle Initial)

C. FEILMEIER, GERALD

Mailing Address

643 N. 147 AVE

City
OMAHA

State

NE

Zip Code

68154-1907

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of NE

Occupation

VP GOV PROG & DIR GOV PROG

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

368.41

Date of Receipt

12 / 31 / 2011

Amount of Each Receipt this Period

368.41

SUBTOTAL of Receipts This Page (optional).....▶

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

1,160.58

12030722909

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

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NAME OF COMMITTEE (In Full)
BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)

A. Full Name (Last, First, Middle Initial)
Bourne, Patrick

Mailing Address
13020 Binney St

City **Omaha** State **Ne** Zip Code **68164-4248**

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

Name of Employer **Blue Cross Blue Shield of Ne** Occupation **VPCOM BUS & GOV AFFAIRS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **36300**

Date of Receipt
12 ' 31 ' 2011

Amount of Each Receipt this Period
36300

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

Mailing Address
11329 Northridge Drive

City **Gretna** State **Ne** Zip Code **68028-6903**

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

Name of Employer **Blue Cross Blue Shield of Ne** Occupation **DIV STRATEGIC IMPLEMENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **32964**

Date of Receipt
12 ' 31 ' 2011

Amount of Each Receipt this Period
32964

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

Mailing Address
5603 N 160th Ave

City **Omaha** State **Ne** Zip Code **68116-3624**

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

Name of Employer **Blue Cross Blue Shield of Ne** Occupation **VP HEALTH NETWORK WELLNESS SYS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **32528**

Date of Receipt
12 ' 31 ' 2011

Amount of Each Receipt this Period
32528

SUBTOTAL of Receipts This Page (optional)..... **1,017.92**

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

12030722910

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 <u>7</u> OF <u>16</u>	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

Full Name (Last, First, Middle Initial)
A. Twohig, Gretchen

Mailing Address
2327 N 150th Ave

City Omaha State Ne Zip Code 68116-7171

FEC ID number of contributing federal political committee. C

Name of Employer Blue Cross Blue Shield Ne of Occupation MGR CONT ADM SR CORP COUNSEL

Receipt For: Primary General Other (specify) Aggregate Year-to-Date 297.94

Date of Receipt
12 / 31 / 2011

Amount of Each Receipt this Period
297.94

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

Mailing Address
13011 Binney Street

City Omaha State Ne Zip Code 68164-4249

FEC ID number of contributing federal political committee. C

Name of Employer Blue Cross Blue Shield Ne of Occupation VP COMMUNICATIONS & PR

Receipt For: Primary General Other (specify) Aggregate Year-to-Date 284.52

Date of Receipt
12 / 31 / 2011

Amount of Each Receipt this Period
284.52

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

Mailing Address
5008 Decatur St

City Omaha State Ne Zip Code 68104-5023

FEC ID number of contributing federal political committee. C

Name of Employer Blue Cross Blue Shield Ne of Occupation DIR OF COMP & BENEFITS

Receipt For: Primary General Other (specify) Aggregate Year-to-Date 275.71

Date of Receipt
12 / 31 / 2011

Amount of Each Receipt this Period
275.71

SUBTOTAL of Receipts This Page (optional).....

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

858.17

12030722911

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

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NAME OF COMMITTEE (In Full)
BLUE CROSS BLUE SHIELD OF NE PAC (BLUE PAC)

Full Name (Last, First, Middle Initial) A. WILLIAMS, CLINT		Date of Receipt 12 / 31 / 2011
Mailing Address 19522 PEARL CIRCLE		Amount of Each Receipt this Period 272.73
City ELKHORN	State Zip Code NE 68022-4449	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 272.73
Name of Employer BLUE CROSS BLUE SHIELD OF NE	Occupation DIR OF PHARMACY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 272.73	

Full Name (Last, First, Middle Initial) B. HADDAD, EDWARD		Date of Receipt 12 / 31 / 2011
Mailing Address 710 HACKBERRY RD		Amount of Each Receipt this Period 272.31
City OMAHA	State Zip Code NE 68132-2636	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 272.31
Name of Employer BLUE CROSS BLUE SHIELD OF NE	Occupation DIR OF CORP COMP & PRIVACY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 272.31	

Full Name (Last, First, Middle Initial) C. ALM, DANIEL		Date of Receipt 12 / 31 / 2011
Mailing Address 5071 S. 75 ST.		Amount of Each Receipt this Period 266.38
City OMAHA	State Zip Code NE 68135-3457	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 266.38
Name of Employer BLUE CROSS BLUE SHIELD OF NE	Occupation VP & CHIEF UNDERWRITING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.38	

SUBTOTAL of Receipts This Page (optional).....	811.42
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE CROSS BLUE SHIELD OF NE PAC (BLUE PAC)

A. Pettijohn TRACIC
 Full Name (Last, First, Middle Initial)
 Mailing Address: **3509 S 152 St**
 City: **Omaha** State: **Ne** Zip Code: **68144-5515**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: **Blue Cross Blue Shield Ne** Occupation: **Mgr INTERPLAN PRGMS MKT ESUP**
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: **260.04**

Date of Receipt: **12 / 31 / 2011**
 Amount of Each Receipt this Period: **260.04**

B. Leahy, Linda
 Full Name (Last, First, Middle Initial)
 Mailing Address: **4411 N 141 Cir**
 City: **Omaha** State: **Ne** Zip Code: **68164-5041**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: **Blue Cross Blue Shield Ne** Occupation: **SR DIR OF CLAIMS**
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: **257.15**

Date of Receipt: **12 / 31 / 2011**
 Amount of Each Receipt this Period: **257.15**

C. Tippett, Robert
 Full Name (Last, First, Middle Initial)
 Mailing Address: **2010 Franklin Dr**
 City: **Papillion** State: **Ne** Zip Code: **68133-3302**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: **Blue Cross Blue Shield Ne** Occupation: **DIR OF BUS PROC ENG**
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: **256.99**

Date of Receipt: **12 / 31 / 2011**
 Amount of Each Receipt this Period: **256.99**

SUBTOTAL of Receipts This Page (optional) **774.18**
TOTAL This Period (last page this line number only) **774.18**

12030722913

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

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NAME OF COMMITTEE (In Full)
BLUE CROSS BLUE SHIELD OF NE PAC (BLUE PAC)

Full Name (Last, First, Middle Initial)
A. ARCHULETA, DANIEL

Mailing Address
6745 SHADOW RIDGE RD

City **LINCOLN** State **NE** Zip Code **68512-0000**

Date of Receipt
12 / 31 / 2011

FEC ID number of contributing federal political committee.
C

Amount of Each Receipt this Period
24842

Name of Employer
BLUE CROSS BLUE SHIELD OF NE

Occupation
VP MEMBER SVS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
24842

Full Name (Last, First, Middle Initial)
ALM, JENNIFER

Mailing Address
11339 NORTHRIDGE DR.

City **GRETNA** State **NE** Zip Code **68028-6903**

Date of Receipt
12 / 31 / 2011

FEC ID number of contributing federal political committee.
C

Amount of Each Receipt this Period
23998

Name of Employer
BLUE CROSS BLUE SHIELD OF NE

Occupation
DIR OF HN REIMBUR. & ANALYTIC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
23998

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

Mailing Address
3303 S. 116 AVE

City **OMAHA** State **NE** Zip Code **68144-4541**

Date of Receipt
12 / 31 / 2011

FEC ID number of contributing federal political committee.
C

Amount of Each Receipt this Period
23968

Name of Employer
BLUE CROSS BLUE SHIELD OF NE

Occupation
VP-PROCONT NEGOT ASSC GEN CSU

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
23968

SUBTOTAL of Receipts This Page (optional)..... **72808**

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

12030722914

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 16

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)

Full Name (Last, First, Middle Initial)

A. Rogge, Laura

Mailing Address

7232 N 154th Street

City Bennington

State Ne

Zip Code 68007-1450

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Ne

Occupation

DIR OF UNDERWRITING

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

23834

Date of Receipt

12 / 31 / 2011

Amount of Each Receipt this Period

23834

Full Name (Last, First, Middle Initial)

B. Crahovac, Susan

Mailing Address

11671 Trumble Loop E

City Omaha

State Ne

Zip Code 68123-1152

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Ne

Occupation

DIR OF CLAIMS - OPS SUP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

23468

Date of Receipt

12 / 31 / 2011

Amount of Each Receipt this Period

23468

Full Name (Last, First, Middle Initial)

C. Plambeck, Teresa

Mailing Address

13704 S 22nd Cir

City Bellevue

State Ne

Zip Code 68123-4760

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Ne

Occupation

DIR OF CLAIMS - BLUE CARD

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

23277

Date of Receipt

12 / 31 / 2011

Amount of Each Receipt this Period

23277

SUBTOTAL of Receipts This Page (optional)..... ▶

70579

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

70579

12030722915

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

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NAME OF COMMITTEE (In Full)
BLUE CROSS BLUE SHIELD OF NE PAC (BLUE PAC)

12030722916

A. Full Name (Last, First, Middle Initial)
VALENTIN, MICHAELA

Mailing Address
2201 S. 47 ST.

City **LINCOLN** State **NE** Zip Code **68506-5504**

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

Name of Employer **BLUE CROSS BLUE SHIELD OF NE** Occupation **DIR OF GOV AFFAIRS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2,323.5

Date of Receipt
12' 31' 2011

Amount of Each Receipt this Period
2,323.5

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

Mailing Address
1307 N. 185TH ST

City **ELKHORN** State **NE** Zip Code **68008-3922**

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

Name of Employer **BLUE CROSS BLUE SHIELD OF NE** Occupation **VP LRG & NATL ACCTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2,323.3

Date of Receipt
12' 31' 2011

Amount of Each Receipt this Period
0.00

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

Mailing Address
10670 WOODLAND TRAIL

City **COUNCIL BLUFFS** State **IA** Zip Code **51503-7172**

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

Name of Employer **BLUE CROSS BLUE SHIELD OF NE** Occupation **DIR OF HNS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2,283.7

Date of Receipt
12' 31' 2011

Amount of Each Receipt this Period
2,283.7

SUBTOTAL of Receipts This Page (optional)..... ▶ **4,607.2**

TOTAL This Period (last page this line 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 13 OF 16
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)

A. Full Name (Last, First, Middle Initial)
Schueeman, Donna

Mailing Address
1011 N Frost Ave

City **Avoca** State **IA** Zip Code **51501-4541**

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

Name of Employer **Blue Cross Blue Shield of Ne** Occupation **DIR OF ENROLL & MEMBER.**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
22684

Date of Receipt
12 ' 31 ' 2011

Amount of Each Receipt this Period
22684

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

Mailing Address
8202 N 164th Street

City **Bennington** State **NE** Zip Code **68007-5572**

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

Name of Employer **Blue Cross Blue Shield of Ne** Occupation **DIR OF CLAIMS - SMOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
22540

Date of Receipt
12 ' 31 ' 2011

Amount of Each Receipt this Period
22540

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

Mailing Address
3734 N 79 St

City **Omaha** State **Ne** Zip Code **68134-4309**

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

Name of Employer **Blue Cross Blue Shield of Ne** Occupation **SR VP CLAIMS - CLAIMS ADM**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
22490

Date of Receipt
12 ' 31 ' 2011

Amount of Each Receipt this Period
22490

SUBTOTAL of Receipts This Page (optional)..... ▶ **67714**

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

12030722917

**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 14 OF 16

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF NE PAC (BLUE PAC)

Full Name (Last, First, Middle Initial)

A. HACKER, TIMOTHY

Mailing Address

7001 S. 195 STREET

City GREINA

State NE

Zip Code 68028-3500

FEC ID number of contributing federal political committee.

C

Name of Employer

BLUE CROSS BLUE SHIELD OF NE

Occupation

DIR COST & BUDGET

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

216.38

Date of Receipt

12 ' 31 ' 2011

Amount of Each Receipt this Period

216.38

Full Name (Last, First, Middle Initial)

B. EATON, RICHARD

Mailing Address

7900 LAKE STREET

City GREINA

State NE

Zip Code 68134-0539

FEC ID number of contributing federal political committee.

C

Name of Employer

BLUE CROSS BLUE SHIELD OF NE

Occupation

PROJECT MGR III

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

212.66

Date of Receipt

12 ' 31 ' 2011

Amount of Each Receipt this Period

212.66

Full Name (Last, First, Middle Initial)

C. HULL, ALLEN

Mailing Address

1800 FOX RUN DRIVE

City PAPILLION

State NE

Zip Code 68040-3270

FEC ID number of contributing federal political committee.

C

Name of Employer

BLUE CROSS BLUE SHIELD OF NE

Occupation

NETWORK ENG III

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

212.29

Date of Receipt

12 ' 31 ' 2011

Amount of Each Receipt this Period

212.29

SUBTOTAL of Receipts This Page (optional).....▶

641.33

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

1203072918

**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 15 OF 16

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)

Full Name (Last, First, Middle Initial)

A. Johnson, Leah

Mailing Address

7414 S 167th St

City Omaha

State NE

Zip Code 68136-3072

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of NE

Occupation

MRG - MEMBERSHIP

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

20736

Date of Receipt

12 ' 31 ' 2011

Amount of Each Receipt this Period

20736

Full Name (Last, First, Middle Initial)

B. Dappen, John

Mailing Address

5640 Bay Meadows Rd

City Omaha

State NE

Zip Code 68127-3518

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of NE

Occupation

COMPLIANCE ANALYST

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

20488

Date of Receipt

12 ' 31 ' 2011

Amount of Each Receipt this Period

20488

Full Name (Last, First, Middle Initial)

C. Toney, Pernell

Mailing Address

4601 Lake Forest Dr

City Papillion

State NE

Zip Code 68133-4740

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of NE

Occupation

MGR DIST DEVELOPMENT

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

20332

Date of Receipt

12 ' 31 ' 2011

Amount of Each Receipt this Period

20332

SUBTOTAL of Receipts This Page (optional)..... ▶

61556

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

12030722919

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 16 OF 16

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)

Full Name (Last, First, Middle Initial)

A. **Synowicki, Robert**

Mailing Address

17211 0 St

City

Omaha

State

Ne

Zip Code

68135

FEC ID number of contributing federal political committee.

C

Date of Receipt

12 / 31 / 2011

Amount of Each Receipt this Period

500.00

Name of Employer

Blue Cross Blue Shield of Ne

Occupation

Board Member

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Full Name (Last, First, Middle Initial)

B. **Mills, Jack**

Mailing Address

1918 Yorkshire Ct

City

Lincoln

State

Ne

Zip Code

68506

FEC ID number of contributing federal political committee.

C

Date of Receipt

12 / 31 / 2011

Amount of Each Receipt this Period

500.00

Name of Employer

Blue Cross Blue Shield of Ne

Occupation

Board Member

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Date of Receipt

12 / 31 / 2011

Amount of Each Receipt this Period

500.00

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

SUBTOTAL of Receipts This Page (optional).....▶

1,000.00

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

12,899.84

12030722920

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 1 OF 2
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)

Full Name (Last, First, Middle Initial) Smith, Adrian		Date of Disbursement 08 / 23 / 2011
Mailing Address 3321 Ave I, Ste 6		Amount of Each Disbursement this Period 2500.00
City Scottsbluff	State NE	
Zip Code 68136		Category/Type 011
Purpose of Disbursement Contribution		
Candidate Name Adrian Smith for Congress		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: Ne District:	

Full Name (Last, First, Middle Initial) Terry, Lee		Date of Disbursement 10 / 11 / 2011
Mailing Address PO Box 540098		Amount of Each Disbursement this Period 1000.00
City Omaha	State Ne	
Zip Code 68154		Category/Type 011
Purpose of Disbursement Contribution		
Candidate Name Lee Terry for Congress		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: Ne District:	

Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		Category/Type
Purpose of Disbursement		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 2 OF 2
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
BLUE CROSS BLUE SHIELD OF NE PAC (BLUEPAC)

A.

Full Name (Last, First, Middle Initial) **BLUE PAC**

Mailing Address **1310 G Street, NW 12th Floor**

City **Washington DC** State _____ Zip Code **20005**

Purpose of Disbursement **Transfer**

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **Ne** District: _____

Date of Disbursement **09 / 16 / 2011**

Amount of Each Disbursement this Period **7,000.00**

Category/Type **008**

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement _____

Amount of Each Disbursement this Period _____

Category/Type _____

C.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement _____

Amount of Each Disbursement this Period _____

Category/Type _____

SUBTOTAL of Disbursements This Page (optional) ▶ **7,000.00**

TOTAL This Period (last page this line number only) ▶ **10,500.00**

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

12030722923

<input type="checkbox"/> Hand Delivered	Date of Receipt
---	-----------------

<input type="checkbox"/> USPS First Class Mail	Postmarked
--	------------

<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
--	------------------

<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	

<input type="checkbox"/> USPS Express Mail	Postmarked
--	------------

<input type="checkbox"/> Postmark Illegible	
---	--

<input type="checkbox"/> No Postmark	
--------------------------------------	--

<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>UPS</i>	Shipping Date <i>1/30/12</i>
Next Business Day Delivery <input checked="" type="checkbox"/>	

<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
--	-----------------

<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
---	-----------------

<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
---	-----------------

<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
---	-------------------------------

<i>[Signature]</i> PREPARER	<i>1/31/12</i> DATE PREPARED
--------------------------------	---------------------------------