

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


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


FEC Form 3X (Rev. 05/2016)

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



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

6. (a) Cash on Hand January 1,

| $2017$ |
| :---: |

(b) Cash on Hand at

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

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

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

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

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

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

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D) $\qquad$
0.00
10. Debts and Obligations Owed BY the Committee (Itemize all on
Schedule C and/or Schedule D) $\qquad$
0.00
$x$
This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

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

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

Write or Type Committee Name
Blue Cross Blue Shield of Alabama PAC

11. Contributions (other than loans) From:
(a) Individuals/Persons Other Than Political Committees
(i) Itemized (use Schedule A)............

|  | 6599.94 |  |
| :---: | :---: | :---: |
|  |  | 184.80 |
|  |  |  |
|  |  | 6784.74 |
|  |  | 0.00 |


|  |  | 36971.17 |
| :---: | :---: | :---: |
|  | , | 4862.35 |
|  | , | 41833.52 |
|  | , | 0.00 |
|  | , | 0.00 |

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


15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)
(Carry Totals to Line 37, page 5). $\qquad$
0,00
$\square 0.00$
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.


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

18. Transfers from Non-Federal and Levin Funds

19. Total Receipts (add Lines 11(d), $12,13,14,15,16,17$, and $18(\mathrm{c})) \ldots \ldots \ldots$
$\square, 6784.74$
$\square, 41833.52$
20. Total Federal Receipts
(subtract Line 18(c) from Line 19) ......... $\downarrow$ $\square$

FEC Form 3X (Rev. 05/2016)

## II. Disbursements

21. Operating Expenditures:
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)
(i) Federal Share $\qquad$ $\ldots$.
(ii) Non-Federal Share $\qquad$
(b) Other Federal Operating Expenditures $\qquad$
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))
22. Transfers to Affiliated/Other Party Committees.
23. Contributions to Federal Candidates/Committees and Other Political Committees.
24. Independent Expenditures (use Schedule E)
25. Coordinated Party Expenditures
(52 U.S.C. § 30116(d))
(use Schedule F). $\qquad$
26. Loan Repayments Made $\qquad$
27. Loans Made
28. Refunds of Contributions To:
(a) Individuals/Persons Other

Than Political Committees $\qquad$
(b) Political Party Committees $\qquad$
(c) Other Political Committees (such as PACs).
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) $\qquad$
$\qquad$
29. Other Disbursements (Including Non-Federal Donations) $\qquad$
0.00

COLUMN B Calendar Year-to-Date

| - 0 | 0.00 |
| :---: | :---: |
| 0. | 0.00 |
| $0$ | 0.00 |
| $0.0$ | 0.00 |
| \% | 0.00 |
| 30000 |  |
|  |  |
| , 0 | 0.00 |
| U 0 | 0.00 |
| $0 .$ | 0.00 |
| , 0 | 0.00 |
| , 0 | 0.00 |
| $0 .$ | 0.00 |
| , 0.0 |  |

0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))
(a) Allocated Federal Election Activity (from Schedule H6)
$\qquad$
(ii) "Levin" Share.
(b) Federal Election Activity Paid Entirely With Federal Funds $\qquad$
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))..

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


31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..

32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31). $\qquad$
$\square$
30000.00

Page 5
FEC Form 3X (Rev. 05/2016)
III. Net Contributions/
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)) ......... $\downarrow$
37. Offsets to Operating Expenditures (from Line 15, page 3) $\qquad$
38. Net Operating Expenditures (subtract Line 37 from Line 36) $\qquad$

COLUMN A
Total This Period

COLUMN B Calendar Year-to-Date



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

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

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


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

Mailing Address 2 North Jackson St


Date of Receipt

| M1M |  |
| :---: | :---: | :---: | :---: |
| 06 | D D |

## Transaction ID : PR122928030044

Amount of Each Receipt this Period


Memo Item

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

Mailing Address 450 Riverchase Parkway East

| $\overline{\text { City }}$ | State | Zip Code |
| :---: | :---: | :---: |
| Birmingham | AL | 35244 |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS AL | Occupation (for Individual) VP Legal Services |  |
|  | Aggrega | r-to-Date <br> 1249.98 |

Date of Receipt


Transaction ID: PR125562730044
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

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

Mailing Address 2 North Jackson Street Suite 202

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

Date of Receipt


Transaction ID : PR130963530044
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

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

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

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

FOR LINE NUMBER: $\quad$ PAGE 7 OF 21 (check only one)


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

Mailing Address 450 Riverchase Parkway East

| Mailing Address 450 Riverchase Parkway East |
| :--- |
| City <br> Birmingham |
| FEC ID number of contributing <br> federal political committee. |
| Name of Employer (for Individual) <br> AL |
| BLUPAC |
| Receipt For: <br> $\square$ <br> Primary $\quad \square$ <br> Other (specify) $\boldsymbol{\nabla}$ |

Date of Receipt

| $06$ | $\begin{gathered} D \quad D \\ 30 \end{gathered}$ | Y $Y$ Y 2017 |
| :---: | :---: | :---: |

Transaction ID : PR132319630044
Amount of Each Receipt this Period
$\square 208.33$

Memo Item

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

Mailing Address 450 Riverchase Parkway East

| $\overline{\text { City }}$ | State | Zip Code |
| :---: | :---: | :---: |
| Birmingham | AL | 35244 |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BLUPAC | Occupation (for Individual) VP Marketing |  |
|  | Aggrega | r-to-Date <br> 1249.98 |

Date of Receipt


Transaction ID : PR132319730044
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

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

Mailing Address 1905 Balfour Dr

| City Birmingham | State <br> AL | Zip Code 35216-2703 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) VP Customer Service |  |
|  | Aggreg | r-to-Date $1249.98$ |

Date of Receipt


Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $624.99$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | - |

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

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

FOR LINE NUMBER: PAGE 8 OF 21 (check only one)


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

Mailing Address 717 Savannah PI

| Mailing Address 717 Savannah PI |  |  |
| :---: | :---: | :---: |
| City Birmingham | State <br> AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35226-3262 \end{array}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) EVP and COO |  |
|  | Aggreg |  |

Date of Receipt

| $06$ | $\begin{gathered} D \\ \hline 0 \end{gathered}$ | $\begin{gathered} y-y \\ 2017 \end{gathered}$ |
| :---: | :---: | :---: |

Transaction ID : PR78823030044
Amount of Each Receipt this Period
$\square 208.33$

Memo Item

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

Mailing Address 703 Morris Blvd

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

Date of Receipt


Transaction ID : PR78825430044
Amount of Each Receipt this Period

Memo Item

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

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

Mailing Address 226 Cambo Ter

| City <br> Birmingham | State <br> AL | Zip Code <br> $35226-1078$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) | Occupation (for Individual) <br> Dept Mgr Enrollment Services |  |
| RCBS Alabama  <br> Receipt For:  <br> Primary <br> Other (specify) Aggregate Year-to-Date $\mathbf{V}$ |  |  |

Date of Receipt

| $06^{M}$ | $30^{D}$ | $2017$ |
| :---: | :---: | :---: |

Transaction ID : PR78825530044
Amount of Each Receipt this Period

$\square$ Memo Item

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

| SUBTOTAL of Receipts This Page (optional)................................................................ | $279.25$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | - |

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

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

FOR LINE NUMBER: PAGE 9 OF 21 (check only one)


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

| Mailing Address 4327 Kennesaw Dr |  |  |
| :---: | :---: | :---: |
| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35213-3311 \end{array}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) <br> Chief Business Officer |  |
|  | Aggreg | $1249.98$ |

Date of Receipt

| 06 | $\begin{gathered} D \quad D \\ 30 \end{gathered}$ | Y Y Y 2017 |
| :---: | :---: | :---: |

Transaction ID : PR78825830044
Amount of Each Receipt this Period
$\square 208.33$

Memo Item

P/R Deduction (\$208.33 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Bruner, William, G, ,

Mailing Address 812 Hickory Trace Cir

| City <br> Birmingham | State <br> AL | Zip Code <br> $35244-4545$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> $\square$ <br> Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78826030044
Amount of Each Receipt this Period


## Memo Item

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

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

Mailing Address 5783 Cypress Trce

| City Birmingham | State <br> AL | Zip Code 35244-5481 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) VP and Chief Actuary |  |
| Receipt For: Primary General Other (specify) | Aggreg | r-to-Date $1249.98$ |

## Date of Receipt



Transaction ID : PR78826330044
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $450.78$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | - |

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

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

FOR LINE NUMBER: PAGE 10 OF 21 (check only one)


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

Mailing Address 156 Stonegate Dr

| Mailing Address 156 Stonegate Dr |
| :--- |
| City <br> Birmingham |
| FEC ID number of contributing <br> federal political committee. |
| Name of Employer (for Individual) <br> AL |
| BCBS Alabama |
| Receipt For: |
| $\square$Primary Code <br> $35242-7054$ |
| $\square$ Other (specify) $\boldsymbol{\nabla}$ |

Date of Receipt

| $06$ | $\begin{gathered} D \quad D \\ 30 \end{gathered}$ | $2017$ |
| :---: | :---: | :---: |

## Transaction ID : PR78826430044

Amount of Each Receipt this Period
$\square 208.33$

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Council, Rebekah, Elgin, ,

Mailing Address 919 38th St S

| City <br> Birmingham | State <br> AL | Zip Code <br> $35222-3602$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> $\square$Primary <br> Other (specify) $\boldsymbol{V}$ | Occupation (for Individual) <br> SVP \& Chief Marketing Officer |  |

Date of Receipt


Transaction ID : PR78826930044
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

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

Mailing Address 1392 Belmont Ln

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

Date of Receipt


Transaction ID : PR78827130044
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $624.99$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | - |

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

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

FOR LINE NUMBER: PAGE 11 OF 21 (check only one)


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

Mailing Address 4474 Heritage Park Dr

| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35226-4171 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Deputy CIO |  |
|  | $\square \quad 1249.98$ |  |

Date of Receipt

| 06 |  | 2017 |
| :---: | :---: | :---: |

## Transaction ID : PR78827630044

Amount of Each Receipt this Period
$\square 208.33$

Memo Item

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

Mailing Address 107 Eagle Cove Dr

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

Date of Receipt


Transaction ID : PR78827730044
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

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

Mailing Address 4221 Waterford Ln

| City Trussville | State <br> AL | Zip Code 35173-1567 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) Management Dept Mgr |
| Receipt For: Primary General Other (specify) | Aggrega | r-to-Date $214.11$ |

Date of Receipt


Amount of Each Receipt this Period


## Memo Item

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

| SUBTOTAL of Receipts This Page (optional)................................................................. | $449.60$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | 5 - |

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

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

FOR LINE NUMBER: PAGE 12 OF 21 (check only one)


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

| Mailing Address PO Box 361343 |  |  |
| :---: | :---: | :---: |
| City Birmingham | State <br> AL | $\begin{aligned} & \hline \text { Zip Code } \\ & 35236-1343 \end{aligned}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Director Associate Services |  |
|  | Aggrega | -to-Date <br> 235.04 |

Date of Receipt

| M 06 | ${ }^{\text {D }} 30$ | $2017$ |
| :---: | :---: | :---: |

Transaction ID : PR78828430044
Amount of Each Receipt this Period


Memo Item

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

Mailing Address 1104 Walnut Cir

| City <br> Alabaster | State <br> AL | Zip Code <br> $35007-9300$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> $\square$ <br> $\square$ <br> Primary <br> Other (specify) $\boldsymbol{V}$ | Occupation (for Individual) <br> Dept Mgr Health Care Networks |  |

Date of Receipt


Transaction ID : PR78828630044
Amount of Each Receipt this Period
$\square$, 33.78

## Memo Item

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

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

Mailing Address 304 fox valley highlands cr

| City Maylene | State <br> AL | Zip Code 35114 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) ness Development |
| Receipt For: Primary General Other (specify) | Aggreg | r-to-Date $784.99$ |

Date of Receipt

| $06$ | $30^{D}$ | $2017$ |
| :---: | :---: | :---: |

Transaction ID : PR78829030044
Amount of Each Receipt this Period
, , 208.33

## Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................ $\downarrow$ | $278.27$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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

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

FOR LINE NUMBER: PAGE 13 OF 21 (check only one)


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

Mailing Address 4008 Charring Cross Ln

| City <br> Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35226-2092 \end{array}$ |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. | Occupation (for Individual) <br> SVP Health Care Networks |  |
| Name of Employer (for Individual) BCBS Alabama |  |  |
| Receipt For: Primary General Other (specify) |  | ar-to-Date $1249.98$ |

Date of Receipt

| 06 | D 30 | $2017$ |
| :---: | :---: | :---: |

Transaction ID : PR78829230044
Amount of Each Receipt this Period


Memo Item

P/R Deduction (\$208.33 Monthly)

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

Mailing Address 2508 wilowbrook cr

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

Date of Receipt


Transaction ID : PR78829430044
Amount of Each Receipt this Period


## Memo Item

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

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

Mailing Address 1230 Glen View Rd

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

Date of Receipt


Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)............................................................... | $452.66$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | , |

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

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

FOR LINE NUMBER: PAGE 14 OF 21 (check only one)


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

Mailing Address 2448 Lancaster Cir

| Mailing Address 2448 Lancaster Cir |  |
| :---: | :---: |
| City <br> Birmingham | State Zip Code <br> AL $35242-4420$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) President \& COO HBS |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ |

Date of Receipt


Amount of Each Receipt this Period


Memo Item

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

Mailing Address 809 Royal Ter

| City <br> Birmingham | State <br> AL | Zip Code <br> $35242-7222$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78830730044
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McIntyre, Douglas, E, , |  |  | Date of Receipt |
| :---: | :---: | :---: | :---: |
| Mailing Address 3489 Birchwood Ln |  |  |  |
| City <br> Birmingham | StateAL | $\begin{aligned} & \hline \text { Zip Code } \\ & 35243-4434 \end{aligned}$ | Transaction ID : PR78830930044 |
|  |  |  | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. |  |  | $208.33$ |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) thcare Network Contract | Memo Item <br> P/R Deduction (\$208.33 Monthly) |
| Receipt For:$\square$Primary $\quad \square$ General <br> $\square$ Other (specify) |  | r-to-Date $\boldsymbol{\nabla}$ |  |
| SUBTOTAL of Receipts This Page (optional) |  |  | $0, \quad 833.32$ |
| TOTAL This Period (last page this line number only).................................................... |  |  |  |

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

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

FOR LINE NUMBER: PAGE 15 OF 21 (check only one)


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

Mailing Address 18 Montcrest Dr

| Mailing Address 18 Montcrest Dr |  |  |
| :---: | :---: | :---: |
| City <br> Birmingham | State AL | $\begin{aligned} & \hline \text { Zip Code } \\ & 35213-3022 \end{aligned}$ |
| FEC ID number of contributing federal political committee. | $\mathrm{C}$ |  |
| Name of Employer (for Individual) BCBS Alabama |  | on (for Individual) |
| Receipt For: Primary General Other (specify) | Aggreg | -to-Date $1249.98$ |

Date of Receipt


## Transaction ID : PR78831330044

Amount of Each Receipt this Period
$\square 208.33$

Memo Item

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

Mailing Address 908 Lakeview Estates Dr

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

Date of Receipt


Transaction ID : PR78831530044
Amount of Each Receipt this Period


## Memo Item

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

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

C. Morrissette, John, M, ,

Mailing Address 1515 Amherst Cir

| City Birmingham | State <br> AL | Zip Code 35216-1009 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. |  |  |
| Name of Employer (for Individual) BCBS Alabama |  | ion (for Individual) es Sup/Nat'l Accts |
|  | Aggreg | r-to-Date $325.00$ |

Date of Receipt


Amount of Each Receipt this Period

$\square$ Memo Item

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

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

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

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

FOR LINE NUMBER: PAGE 16 OF 21 (check only one)


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

Mailing Address 503 Olmsted St

| Mailing Address 503 Olmsted St |  |  |
| :---: | :---: | :---: |
| City Birmingham | State AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 35242-1825 \end{array}$ |
| FEC ID number of contributing federal political committee. |  |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) VP Health Management |  |
| Receipt For: Primary General Other (specify) | Aggreg | r-to-Date $1249.98$ |

Date of Receipt

| $\begin{gathered} M 1 M^{M} \\ 06 \end{gathered}$ | $\begin{gathered} D \quad D \\ 30 \end{gathered}$ | $\begin{aligned} & Y-Y \\ & 2017 \end{aligned}$ |
| :---: | :---: | :---: |

Transaction ID : PR78831730044
Amount of Each Receipt this Period
$\square 208.33$

Memo Item

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

Mailing Address 101 Creekwood Ln

| City <br> Helena | State <br> AL | Zip Code <br> $35080-3273$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> $\square$Primary <br> Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78831930044
Amount of Each Receipt this Period

Memo Item

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

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

Mailing Address 1809 Lucinda Robey PI

| City Birmingham | State AL | Zip Code 35211-3872 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. |  |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) SVP and Chief Legal Officer |  |
|  | Aggreg | r-to-Date $1249.98$ |

Date of Receipt

| MIM | D D |  |
| :---: | :---: | :---: |
| 06 | 30 | 2017 |
| Transaction ID : PR78832030044 |  |  |

Transaction ID : PR78832030044
Amount of Each Receipt this Period

$\square$ Memo Item

P/R Deduction (\$208.33 Monthly)

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

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

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

FOR LINE NUMBER: PAGE 17 OF 21 (check only one)


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

Mailing Address 3700 Montevallo Rd S

| Mailing Address 3700 Montevallo Rd S |
| :--- |
| City <br> Birmingham |
| FEC ID number of contributing <br> federal political committee. |
| Name of Employer (for Individual) <br> AL |
| BCBS Alabama |
| Receipt For: |
| $\square$Primary Code <br> $35213-4208$ |
| $\square$ |
| Other (specify) $\boldsymbol{\nabla}$ General |

Date of Receipt


Transaction ID : PR78832130044
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Saxon, Vickie, L, ,

Mailing Address 4127 Heatherhedge Ln

| City | State | Zip Code |
| :---: | :---: | :---: |
| Birmingham | AL | 35226-2095 |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | tion (for Individual) nterprise Resources |
|  | Aggrega <br> $\square$ |  |

Date of Receipt


Transaction ID : PR78832730044
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

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

Mailing Address 5440 Magnolia Trce

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

Date of Receipt


Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)


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

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

FOR LINE NUMBER: PAGE 18 OF 21 (check only one)


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

Mailing Address 3755 Everest Dr

| Mailing Address 3755 Everest Dr |  |  |
| :---: | :---: | :---: |
| City <br> Montgomery | State <br> AL | $\begin{array}{\|l\|} \hline \text { Zip Code } \\ 36106-3336 \end{array}$ |
| FEC ID number of contributing federal political committee. | C |  |
| Name of Employer (for Individual) BCBS Alabama |  | (for Individual) ernmental Affairs |
| Receipt For: Primary General Other (specify) | Aggreg | r-to-Date <br> 720.00 |

Date of Receipt


Transaction ID : PR78833630044
Amount of Each Receipt this Period


Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Sullivan, Christine, V, ,

Mailing Address 2058 Wild Flower Dr

| City <br> Birmingham | State <br> AL | Zip Code <br> $35244-1723$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) <br> BCBS Alabama |  |  |
| Receipt For: <br> Primary <br> Other (specify) $\boldsymbol{V}$ | General <br> Mgr Large Group Sales/Acct Mgt |  |

Date of Receipt


Transaction ID : PR78833730044
Amount of Each Receipt this Period


## Memo Item

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


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

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

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


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

Mailing Address 14 Signal Hill Rd

| Mailing Address 14 Signal Hill Rd |  |
| :---: | :---: |
| City <br> Spanish Fort | State Zip Code <br> AL $36527-3138$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) District Manager |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ |

Date of Receipt

| $\begin{gathered} M 1 M^{M} \\ 06 \end{gathered}$ | D $1{ }^{\text {D }}$ <br> 30 | $\begin{aligned} & Y-Y \\ & 2017 \end{aligned}$ |
| :---: | :---: | :---: |

## Transaction ID : PR78834530044

Amount of Each Receipt this Period


Memo Item

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

Mailing Address 109 Coshatt Trl

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

Date of Receipt


Transaction ID : PR78834630044
Amount of Each Receipt this Period


## Memo Item

P/R Deduction (\$208.33 Monthly)

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

Mailing Address 2021 Chandapine Cir

| City Pelham | State <br> AL | Zip Code 35124-1430 |
| :---: | :---: | :---: |
| FEC ID number of contributing federal political committee. |  |  |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) Dept Mgr Corporate Strategy |  |
| Receipt For: Primary General Other (specify) | Aggrega | r-to-Date $245.96$ |

Date of Receipt


Transaction ID : PR78834730044
Amount of Each Receipt this Period


## Memo Item

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

| SUBTOTAL of Receipts This Page (optional)................................................................ | $288.79$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | - |

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

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

FOR LINE NUMBER: PAGE 20 OF 21 (check only one)


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

Mailing Address 1935 Red Oak Ln NE

| Mailing Address 1935 Red Oak Ln NE |  |
| :---: | :---: |
| City <br> Arab | State Zip Code <br> AL $35016-5360$ |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer (for Individual) BCBS Alabama | Occupation (for Individual) District Manager |
|  | Aggregate Year-to-Date |

Date of Receipt


Amount of Each Receipt this Period


Memo Item

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Whitehead, Ronald, B, ,

Mailing Address 1009 Margaret St

| City <br> Leeds | State <br> AL | Zip Code <br> $35094-2736$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer (for Individual) |  |  |
| BCBS Alabama |  |  |
| Receipt For: <br> $\square$ <br> Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{V}$ | Occupation (for Individual) <br> HBS CFO |  |

Date of Receipt


Transaction ID : PR78834930044
Amount of Each Receipt this Period


## Memo Item

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

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

Mailing Address 130 Hampton Drive

| City <br> Pelham |
| :--- |
| State <br> FEC ID number of contributing <br> federal political committee. Zip Code <br> 35244  <br> Name of Employer (for Individual) <br> BCBS AL C  <br> Receipt For:   <br> $\square$ Primary $\square$ General Aggregate Year-to-Date $\nabla$  <br> Other (specify)   |

Date of Receipt


Transaction ID : PR94042830044
Amount of Each Receipt this Period
, , 208.33

## Memo Item

P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | $290.17$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)........................................................ | $6599.94$ |

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



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

| Full Name (Last, First, Middle Initial) <br> A. Defend America PAC |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |
| Mailing Address PO Box 2626 |  |  |  |  |  |
| City State Zip Code <br> Tuscaloosa AL $35403-2626$ |  |  |  |  | FEC Identification Number |
| Purpose of Disbursement Direct Contribution |  |  |  | 011 | C $\quad 00325993$ <br> Transaction ID : 10574717 <br> Amount of Each Disbursement this Period |
| Candidate Name <br> Defend America PAC |  |  |  | Category/ Type |  |
| Office Sought: |  House <br> Senate <br> $\square$ President |  |  |  | $\square$ Memo Item |

Full Name (Last, First, Middle Initial)
B. Mike Rogers for Congress

c.

## Mailing Address



## Date of Disbursement



FEC Identification Number
C C00367862

Transaction ID : 10574719
Amount of Each Disbursement this Period
$\square$ Direct Contribution

Memo Item

Date of Disbursement


FEC Identification Number
C
Amount of Each Disbursement this Period


Memo Item


|  | 10000.00 |
| :---: | :---: | :---: |
|  | ,$\quad 10000.00$ |

