

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 Robin Stone


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

| L | $\begin{aligned} & \text { Office } \\ & \text { Use } \\ & \text { Only } \end{aligned}$ |  |  |  |  |  |  |  | FEC FORM 3X <br> Rev. 12/2004 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |

FEC Form 3X (Rev. 02/2003)

## Write or Type Committee Name

Blue Cross Blue Shield of Alabama PAC

6. (a) Cash on Hand January 1,
Y Y
2014
(b) Cash on Hand at

Beginning of Reporting Period $\qquad$

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

$\square \quad 31342.96$
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines
6(a) and 6(c) for Column B) $\qquad$
193285.55
203385.55
7. Total Disbursements (from Line 31) $\qquad$
$\square$

8. Cash on Hand at Close of Reporting Period
(subtract Line 7 from Line 6(d)) $\qquad$
$\square 173285.55$

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

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)............

|  | 5119.92 |
| :---: | :---: |
|  | 1465.82 |
|  | 6585.74 |
|  | 0.00 |
|  | 0.00 |


|  | 25359.68 |
| :---: | :---: |
|  | 5983.28 |
|  | ,$\quad 31342.96$ |
|  | 0.00 |
|  | 0.00 |

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


|  | 31342.96 |
| :---: | :---: |
|  | 0.00 |
|  | 0.00 |
|  | 0.00 |

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


| 0,000 |  |
| :--- | :--- |
|  | 0.00 |



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

19. Total Receipts (add Lines 11(d), $12,13,14,15,16,17$, and $18(\mathrm{c})) \ldots \ldots \ldots$ $\square$
31342.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ......... $\downarrow$

$\square 31342.96$

FEC Form 3X (Rev. 02/2003)

## II. Disbursements

21. Operating Expenditures:
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)
(i) Federal Share $\qquad$
(ii) Non-Federal Share. $\qquad$
(b) Other Federal Operating Expenditures $\qquad$
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))
22. Transfers to Affiliated/Other Party Committees
23. Contributions to

Federal Candidates/Committees and Other Political Committees. $\qquad$
24. Independent Expenditures (use Schedule E)
25. Coordinated Party Expenditures
(2 U.S.C. §441a(d))
(use Schedule F)... $\qquad$
26. Loan Repayments Made $\qquad$
27. Loans Made............................
(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))..........
29. Other Disbursements $\qquad$
0.0 .00
$0,0.00$
30. Federal Election Activity (2 U.S.C. §431(20))
(a) Allocated Federal Election Activity (from Schedule H6)
(i) Federal Share $\qquad$
(ii) "Levin" Share. $\qquad$
$\qquad$
(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, | 0.00 |
| :---: | :---: |
| , 0, | 0.00 |
| , 0, | 0.00 |


|  | 0.00 |
| :---: | :---: |
| ,$\quad$, | 0.00 |
| 0, | 0.00 |
| 0, | 0.00 |

31. Total Disbursements (add Lines 21(c), 22, $23,24,25,26,27,28(d), 29$ and $30(c))$..
20000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)



DETAILED SUMMARY PAGE
of Disbursements

Page 5
FEC Form 3X (Rev. 02/2003)

## III. Net Contributions/Operating Expenditures

33. Total Contributions (other than loans) (from Line 11(d), page 3)
34. Total Contribution Refunds (from Line 28(d))
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ......
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



Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

| Full Name (Last, First, Middle Initia) <br> A. Michael J. Velezis |  | Date of Receipt |
| :---: | :---: | :---: |
| Mailing Address 2 North Jackson St |  |  |
| City Montgomery | State Zip Code | Transaction ID : PR125562710687 |
|  | AL 36104 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. |  | P/R Deduction (\$208.33 Monthly) 208.33 |
| Name of Employer BCBS AL | Occupation <br> VP Legal Services |  |
|  | Aggregate Year-to-Date |  |
| Full Name (Last, First, Middle Initial) <br> B. Robert R Orr |  | Date of Receipt |
| Mailing Address 1905 Balfour Dr |  |  |
| City <br> Birmingham | State Zip Code <br> AL $35216-2703$ | Transaction ID : PR78822910687 |
|  |  | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | $208.33$ |
| Name of Employer BCBS Alabama | Occupation <br> VP Customer Service | P/R Deduction (\$208.33 Monthly) |
|  | Aggregate Year-to-Date |  |
| Full Name (Last, First, Middle Initial) <br> C. Timothy Vines |  | Date of Receipt |
| Mailing Address 717 Savannah PI |  | 04 <br> 30 <br> 2014 |
| City Birmingham | State Zip Code <br> AL $35226-3262$ | Transaction ID : PR78823010687 |
|  |  | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | $208.33$ |
| Name of Employer <br> BCBS Alabama | Occupation <br> Chief Administrative Officer | P/R Deduction (\$208.33 Monthly) |
|  | Aggregate Year-to-Date $\square$ <br> 833.32 |  |
| SUBTOTAL of Receipts This Page (optional)................................................................ |  |  |
| TOTAL This Period (last page this line number only).......................................................... |  |  |

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



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

| Full Name (Last, First, Middle Initial) <br> A. Dick Dowling Briggs |  | Date of Receipt |
| :---: | :---: | :---: |
| Mailing Address 4327 Kennesaw Dr |  |  |
| City | State Zip Code |  |
| Birmingham | AL 35213-3311 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | P/R Deduction (\$208.33 Monthly) |
| Name of Employer <br> BCBS Alabama | Occupation <br> SVP Business Operations |  |
|  | Aggregate Year-to-Date |  |
| Full Name (Last, First, Middle Initial) <br> B. Noel W Carden |  | Date of Receipt |
| Mailing Address 5783 Cypress Trce |  |  |
| City | State Zip Code | Transaction ID : PR78826310687 |
| Birmingham | AL 35244-5481 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | $208.33$ |
| Name of Employer BCBS Alabama | Occupation VP and Chief Actuary | P/R Deduction (\$208.33 Monthly) |
|  | Aggregate Year-to-Date $\square$ |  |

Full Name (Last, First, Middle Initial)
C. Tony H Carter

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

Date of Receipt


Transaction ID : PR78826410687
Amount of Each Receipt this Period


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



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

| Mailing Address 919 38th St S |  |
| :---: | :---: |
| City | State Zip Code |
| Birmingham | AL 35222-3602 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer | Occupation |
| BCBS Alabama | VP Marketing |
| Receipt For: | Aggregate Year-to-Date $\boldsymbol{V}$ |
| Other (specify) | 833.32 |

Date of Receipt


Transaction ID : PR78826910687
Amount of Each Receipt this Period
208.33

P/R Deduction (\$208.33 Monthly)

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

Mailing Address 4474 Heritage Park Dr

| City <br> Birmingham | State <br> AL | Zip Code <br> $35226-4171$ |
| :--- | :--- | :--- |
| FEC ID number of contributing | C |  |
| federal political committee. |  |  |
| Name of Employer | Occupation |  |
| BCBS Alabama | VP Application Development |  |
| Receipt For: |  |  |
| $\square$ Primary $\square$ General | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |  |
| $\square$ Other (specify) $\boldsymbol{V}$ |  |  |

Date of Receipt


Transaction ID : PR78827610687
Amount of Each Receipt this Period


P/R Deduction (\$208.33 Monthly)

## Full Name (Last, First, Middle Initial)

C. Brian D Edwards

Mailing Address 107 Eagle Cove Dr

| City <br> Pelham | State Zip Code <br> AL $35124-2223$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer <br> BCBS Alabama | Occupation VP Controller |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ <br> 833.32 |

Date of Receipt

| $04$ | $\begin{gathered} D \quad D \\ 30 \end{gathered}$ | $2014$ |
| :---: | :---: | :---: |

Transaction ID : PR78827710687
Amount of Each Receipt this Period
$\square 208.33$

> 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



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


## 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 (check only one)


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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC

Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : PR78829610687
Amount of Each Receipt this Period
208.33

P/R Deduction (\$208.33 Monthly)

Full Name (Last, First, Middle Initial)
B. Timothy L Kirkpatrick

Mailing Address 5606 Lake Trace Dr

| City | State Zip Code |
| :---: | :---: |
| Birmingham | AL 35244-3967 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer BCBS Alabama | Occupation <br> Executive Vice President |
| Receipt For:$\square$Primary $\quad \square$ General <br> $\square$ Other (specify) $\nabla$ | Aggregate Year-to-Date $\square$ <br> 833.32 |

Date of Receipt


Transaction ID : PR78830010687
Amount of Each Receipt this Period


P/R Deduction (\$208.33 Monthly)

Full Name (Last, First, Middle Initial)
C. Sherrie D LeMier

Mailing Address 2448 Lancaster Cir

| City Birmingham | State Zip Code <br> AL $35242-4420$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer <br> BCBS Alabama | Occupation <br> President \& COO HBS |
|  | Aggregate Year-to-Date $\square$ <br> 833.32 |

Date of Receipt


Transaction ID : PR78830310687
Amount of Each Receipt this Period
208.33

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



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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC

| Full Name (Last, First, Middle In Carol D Mackin |  | Date of Receipt |
| :---: | :---: | :---: |
| Mailing Address 809 Royal Ter |  |  |
| City | State Zip Code |  |
| Birmingham | AL 35242-7222 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | $208.33$ |
| Name of Employer BCBS Alabama | Occupation <br> VP Corp Comm/Community Rel | P/R Deduction (\$208.33 Monthly) |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ |  |


| Full Name (Last, First, Middle Initial) <br> B. Douglas E McIntyre |  |
| :---: | :---: |
| Mailing Address 3489 Birchwood Ln |  |
| City | State Zip Code |
| Birmingham | AL 35243-4434 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer BCBS Alabama | Occupation <br> VP Network Operations |
|  | Aggregate Year-to-Date |

Date of Receipt


Transaction ID : PR78830910687
Amount of Each Receipt this Period


P/R Deduction (\$208.33 Monthly)

## Full Name (Last, First, Middle Initial)

C. John Matthew Moor

Mailing Address 18 Montcrest Dr

| City <br> Birmingham | State <br> AL | Zip Code <br> $35213-3022$ |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer | Occupation |  |
| BCBS Alabama | VP UTIC |  |

Date of Receipt


Transaction ID : PR78831310687
Amount of Each Receipt this Period


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 12 OF (check only one)


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name of committee (In Full)
Blue Cross Blue Shield of Alabama PAC

Full Name (Last, First, Middle Initial)

| A. Ashley S Mosko |
| :--- |
| Mailing Address 503 Olmsted St |
| City |
| Birmingham |
| FEC ID number of contributing |
| federal political committee. |
| Name of Employer AL Ctate <br> BCBS Alabama Code   <br> Receipt For:   <br> $\square$ Primary $\square$ General   <br> $\square$ Other (specify) $\boldsymbol{\nabla}$ Occupation  |

Date of Receipt


Transaction ID : PR78831710687
Amount of Each Receipt this Period
208.33

P/R Deduction (\$208.33 Monthly)

Full Name (Last, First, Middle Initial)
B. Michael L Patterson

Mailing Address 1809 Lucinda Robey PI

| City <br> Birmingham | State Zip Code <br> AL $35211-3872$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer BCBS Alabama | Occupation SVP and Chief Legal Officer |
|  | Aggregate Year-to-Date $833.32$ |

Date of Receipt


Transaction ID : PR78832010687
Amount of Each Receipt this Period


P/R Deduction (\$208.33 Monthly)

## Full Name (Last, First, Middle Initial)

C. Vickie Ledbetter Saxon

Mailing Address 4127 Heatherhedge Ln

| City Birmingham | State Zip Code <br> AL $35226-2095$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer BCBS Alabama | Occupation <br> SVP Enterprise Resources |
|  | Aggregate Year-to-Date $\square$ |

Date of Receipt

| 04 | / D D ${ }^{\text {c }}$ | $2014$ |
| :---: | :---: | :---: |

Transaction ID : PR78832710687
Amount of Each Receipt this Period


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 13 OF (check only one)


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nAME OF COMmitTEE (In Full)
Blue Cross Blue Shield of Alabama PAC
Full Name (Last, First, Middle Initial)
A. Joseph Robin Stone

Mailing Address 3755 Everest Dr

| Mailing Address 3755 Everest Dr |  |
| :---: | :---: |
| City | State Zip Code |
| Montgomery | AL 36106-3336 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer | Occupation |
| BCBS Alabama | VP Governmental Affairs |
| Receipt For: | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |
| $\square$ Other (specify) $\nabla$ | 480.00 |

Date of Receipt


Transaction ID : PR78833610687
Amount of Each Receipt this Period
$\square 120.00$

P/R Deduction (\$120.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Cynthia M Vice

Mailing Address 936 Beech Ln

| City <br> Birmingham | State Zip Code <br> AL $35213-2024$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer BCBS Alabama | Occupation <br> SVP \& Chief Financial Officer |
|  | Aggregate Year-to-Date $\square$ |

Date of Receipt


Transaction ID : PR78834310687
Amount of Each Receipt this Period


P/R Deduction (\$208.33 Monthly)

## Full Name (Last, First, Middle Initial)

c. Brandon S Ward

Mailing Address 109 Coshatt Trl

| City Birmingham | State Zip Code <br> AL $35244-2439$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer <br> BCBS Alabama | Occupation <br> VP Business Services |
|  | Aggregate Year-to-Date $\square$ <br> 833.32 |

Date of Receipt

| $04$ | $30$ | $2014$ |
| :---: | :---: | :---: |

Transaction ID : PR78834610687
Amount of Each Receipt this Period


P/R Deduction (\$208.33 Monthly)

| SUBTOTAL of Receipts This Page (optional)................................................................ | 536.66 |
| :---: | :---: |
| 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 15 (check only one)


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

| Full Name (Last, First, Middle Initial) <br> A. James S Hill |  | Date of Receipt $\square$ $\square$ <br> 30 $\qquad$ <br> Transaction ID : PR94042810687 |
| :---: | :---: | :---: |
| Mailing Address 130 Hampton Drive |  |  |
| City | State Zip Code |  |
| Pelham | AL 35244 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | $208.33$ |
| Name of Employer BCBS AL | Occupation <br> VP Claims \& Benefit Admin | P/R Deduction (\$208.33 Monthly) |
|  | Aggregate Year-to-Date $\square$ |  |

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

Mailing Address
City State Zip Code

FEC ID number of contributing federal political committee.


| Name of Employer | Occupation |
| :--- | :--- |
| Receipt For: |  |
| $\square$ Primary $\square$ General |  |
| $\square$ Other (specify) $\nabla$ |  |$\quad$ Aggregate Year-to-Date $\boldsymbol{\nabla}$

Date of Receipt


Amount of Each Receipt this Period
$\square$

Date of Receipt
c.

| Mailing Address |
| :--- |
| City |
| FEC ID number of contributing <br> federal political committee. |
| Name of Employer |
| Receipt For: <br> $\square$ Primary $\quad \square$ General <br> Other (specify) $\boldsymbol{\nabla}$ |



Amount of Each Receipt this Period



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

|  | FOR LINE NUMBER: (check only one) |  |  |  |  |  | PAGE |  | 15 | OF |  | 15 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| for each category of the |  |  |  |  |  |  |  |  |  |  |  |  |
| Detailed Summary Page | 21b | $\times$ |  |  | 23 |  |  |  | 25 |  |  | 26 |
|  | 27 |  | 28a |  | 28b |  | 28c |  | 29 |  |  | bb |

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


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

| Mailing Address |  |  |  |
| :---: | :---: | :---: | :---: |
| City |  | State Zip Code |  |
| Purpose of Disbursement |  |  |  |
| Candidate Name |  |  | Category/ Type |
| Office Sought: |  House <br> Senate <br> $\square$ President |  |  |

## Date of Disbursement

MIM ' DID ' YIYTYIV

Amount of Each Disbursement this Period
$\qquad$

Date of Disbursement


| City | State Zip Code |  |  |
| :---: | :---: | :---: | :---: |
| Purpose of Disbursement |  |  |  |
| Candidate Nam |  |  | Category/ Type |
| Office Sought: |  House <br> Senate <br> $\square$ President |  |  |

Amount of Each Disbursement this Period


| SUBTOTAL of Disbursements This Page (optional)............................................................. | 20000.00 |
| :---: | :---: |
| TOTAL This Period (last page this line number only).................................................. | 20000.00 |

