

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Blue Cross Blue Shield of Michigan PAC

ADDRESS (number and street)

602 W. Ionia

☐Check if different  
than previously  
reported. (ACC)

Lansing

MI

48933

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00084061

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☒July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2007

through

06

30

2007

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

Mr. Mark Cook

Signature of Treasurer

Electronically Filed by Mr. Mark Cook

Date

07

31

2007

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

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

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

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 1 | 0 | 1 | 2 | 0 | 0 | 7 |

To:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 6 | 3 | 0 | 2 | 0 | 0 | 7 |

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1 <span>Y Y Y Y<br/>2007</span>   |                         | 86657.95                          |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....   | 86902.53                |                                   |
| (c) Total Receipts (from Line 19) .....  | 237506.36               | 237506.36                         |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....             | 324408.89               | 324164.31                         |
| 7. Total Disbursements (from Line 31) .....  | 248774.00               | 248774.00                         |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | 75634.89                | 75390.31                          |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                   |

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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Blue Cross Blue Shield of Michigan PAC

Report Covering the Period:

From:

M M  
0 1D D  
0 1Y Y Y Y  
2 0 0 7

To:

M M  
0 6D D  
3 0Y Y Y Y  
2 0 0 7

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 133268.00                     | 133268.00                         |
| (i) Itemized (use Schedule A) .....  | 97364.27                      | 97364.27                          |
| (ii) Unitemized .....  | 230632.27                     | 230632.27                         |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤   | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....  | 0.00                          | 0.00                              |
| (d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤  | 230632.27                     | 230632.27                         |
| 12. Transfers From Affiliated/Other Party Committees .....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....   | 0.00                          | 0.00                              |
| 14. Loan Repayments Received .....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) ..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           | 4585.00                       | 4585.00                           |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 2289.09                       | 2289.09                           |
| 18. Transfers from Non-Federal and Levin Funds   |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....   | 0.00                          | 0.00                              |
| (c) Total Transfer (add 18(a) and 18(b)).  | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                          | 237506.36                     | 237506.36                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 237506.36                     | 237506.36                         |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. DISBURSEMENTS   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:   |                               |                                   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                      |                               |                                   |
| (i) Federal Share.....  | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....   | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures.....   | 0.00                          | 0.00                              |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....                           | 0.00                          | 0.00                              |
| 22. Transfers to Affiliated/Other Party Committees.....   | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....          | 47500.00                      | 47500.00                          |
| 24. Independent Expenditure (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....  | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....   | 0.00                          | 0.00                              |
| 27. Loans Made.....   | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                   | 0.00                          | 0.00                              |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements.....  | 201274.00                     | 201274.00                         |
| 30. Federal Election Activity (2 U.S.C 431(20))   |                               |                                   |
| (a) Shared Federal Election Activity (from Schedule H6)   |                               |                                   |
| (i) Federal Share .....   | 0.00                          | 0.00                              |
| (ii) "Levin" Share .....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                            | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....               | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..        | 248774.00                     | 248774.00                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 248774.00                     | 248774.00                         |

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 5

| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 230632.27                     | 230632.27                         |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 230632.27                     | 230632.27                         |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 0.00                          | 0.00                              |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 0.00                          | 0.00                              |

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 199

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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 Michigan PAC

|   |                                    |   |
|---|------------------------------------|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Capitol National Bank  |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 1 / 3 0 / 2 0 0 7 |
| Mailing Address 200 Washington Sq.  |                                    | <b>Transaction ID:</b> 26313452                                 |
| City<br>Lansing   | State<br>MI                        | Zip Code<br>48933   |
| FEC ID number of contributing federal political committee.<br><input type="checkbox"/> C  |                                    | Amount of Each Receipt this Period<br>351.06                    |
| Name of Employer  | Occupation                         |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>351.06 |   |

|   |                                    |   |
|---|------------------------------------|---|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Capitol National Bank  |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 2 / 2 8 / 2 0 0 7 |
| Mailing Address 200 Washington Sq.  |                                    | <b>Transaction ID:</b> 26313453                                 |
| City<br>Lansing   | State<br>MI                        | Zip Code<br>48933   |
| FEC ID number of contributing federal political committee.<br><input type="checkbox"/> C  |                                    | Amount of Each Receipt this Period<br>387.08                    |
| Name of Employer  | Occupation                         |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>738.14 |   |

|   |                                     |   |
|---|-------------------------------------|---|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Capitol National Bank  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 3 / 3 1 / 2 0 0 7 |
| Mailing Address 200 Washington Sq.  |                                     | <b>Transaction ID:</b> 26313454                                 |
| City<br>Lansing   | State<br>MI                         | Zip Code<br>48933   |
| FEC ID number of contributing federal political committee.<br><input type="checkbox"/> C  |                                     | Amount of Each Receipt this Period<br>461.18                    |
| Name of Employer  | Occupation                          |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1199.32 |   |

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

1199.32

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

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

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

FOR LINE NUMBER: PAGE 7 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

A. Capitol National Bank

Mailing Address 200 Washington Sq.

City State Zip Code  
Lansing MI 48933

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1565.71

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 7 / 2 0 0 7

Transaction ID: 26313455

Amount of Each Receipt this Period

366.39

Full Name (Last, First, Middle Initial)

B. Capitol National Bank

Mailing Address 200 Washington Sq.

City State Zip Code  
Lansing MI 48933

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1927.84

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: 26313456

Amount of Each Receipt this Period

362.13

Full Name (Last, First, Middle Initial)

C. Capitol National Bank

Mailing Address 200 Washington Sq.

City State Zip Code  
Lansing MI 48933

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2289.09

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 7

Transaction ID: 26313457

Amount of Each Receipt this Period

361.25

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

1089.77

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

2289.09

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Joanne Wright

Mailing Address 42564 White Hart Blvd

City State Zip Code  
 Canton MI 48188-2665

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 0 1 / 2 0 0 7

Transaction ID: 26313458

Amount of Each Receipt this Period

325.00

Full Name (Last, First, Middle Initial)

**B.** Joseph R Niemer

Mailing Address 2115 W Lincoln St

City State Zip Code  
 Birmingham MI 48009-1826

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y

Transaction ID: PR1001877517245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

**C.** Rita J Kakish

Mailing Address 17353 Fitzgerald

City State Zip Code  
 Livonia MI 48152-2709

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y

Transaction ID: PR1018716417245

Amount of Each Receipt this Period

234.00

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

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

793.00

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



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

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

FOR LINE NUMBER: PAGE 9 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Kenneth R Dallafor  
Mailing Address 4650 Huntington Dr

City State Zip Code  
Brighton MI 48116-5136

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR1023392317245

Amount of Each Receipt this Period

540.00

P/R Deduction (\$60.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Dan J Zolkowski  
Mailing Address 1841 Ridgewood

City State Zip Code  
East Lansing MI 48823-2939

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR1025168717245

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Cindy S Monroe  
Mailing Address 275 Applewood Lane

City State Zip Code  
Bloomfield MI 48302-1101

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR1025169217245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

1265.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

A. Michael R Schwartz

Mailing Address 582 Henrietta Street

City

Birmingham

State

MI

Zip Code

48009-1453

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation

SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1550956917245

Amount of Each Receipt this Period

300.00

P/R Deduction (\$60.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Deidra A Wilson

Mailing Address 3031 Crofton Dr

City

Dewitt

State

MI

Zip Code

48820-7770

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1593164917245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

C. Harvie Jarriell

Mailing Address 1219 Berkshire Dr

City

Williamston

State

MI

Zip Code

48895-9211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1604520117245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

911.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael B Zell  
Mailing Address 5411 Bright Creek Court

City State Zip Code  
Flint MI 48532-2254

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1604520317245

Amount of Each Receipt this Period

234.00

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

**B.** Full Name (Last, First, Middle Initial)  
Kathryn G Levine  
Mailing Address 1788 Pierce

City State Zip Code  
Birmingham MI 48009-2056

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1691486017245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Joseph H Hohner  
Mailing Address 2106 Stonebridge Way

City State Zip Code  
Canton MI 48188-6227

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1723467717245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

1404.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Ann M Baker

Mailing Address 1153 Nottingham

City State Zip Code  
 Grosse Pointe Park MI 48230-1339

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1750096517245

Amount of Each Receipt this Period

228.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.** Richard A Hetzel

Mailing Address 635 McKinley St

City State Zip Code  
 Plymouth MI 48170-1521

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1793762917245

Amount of Each Receipt this Period

600.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C.** Phillip D Churchill Jr

Mailing Address 1839 Lakewood Drive

City State Zip Code  
 Troy MI 48083-5520

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1794222917245

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

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

1176.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Gary M Harvey

Mailing Address 1835 Robindale

City State Zip Code  
 Dearborn MI 48128-1047

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

489.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1794229917245

Amount of Each Receipt this Period

489.00

P/R Deduction (\$45.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Kimberly A Bennett

Mailing Address 24121 Rosewood

City State Zip Code  
 Oak Park MI 48237-2271

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
OTHER NON-EXEMPT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1805296217245

Amount of Each Receipt this Period

234.00

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

**C.** Full Name (Last, First, Middle Initial)  
Shelley L Van Riper

Mailing Address 8191 Hummingbird Ct

City State Zip Code  
 Ypsilanti MI 48197-6213

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1805296917245

Amount of Each Receipt this Period

234.00

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

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

957.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 199

(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 Michigan PAC

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

Donna J Lomas-Juarez

Mailing Address 16266 Southampton Court

City State Zip Code  
 Livonia MI 48154-2518

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1805304517245

Amount of Each Receipt this Period

234.00

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

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

Bradley A Anderson

Mailing Address 67900 S Forest

City State Zip Code  
 Richmond MI 48062-1627

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1812709717245

Amount of Each Receipt this Period

234.00

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

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

Larry R Watson

Mailing Address 2462 Coe Court

City State Zip Code  
 Perrysburg OH 43551-5623

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1839243717245

Amount of Each Receipt this Period

234.00

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

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

702.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)

Eva L Wendt

Mailing Address 3692 Watuga St

City State Zip Code  
 Commerce Township MI 48390-1058

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR1839247517245

Amount of Each Receipt this Period

405.00

P/R Deduction (\$45.00 Bi-Weekly)

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

Michael Allie

Mailing Address 46333 W Main St

City State Zip Code  
 Northville MI 48167-1754

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR1933686417245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)

Lisa Welford

Mailing Address 2055 W Bend Ct

City State Zip Code  
 Bloomfield Hills MI 48302-1216

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR1933687917245

Amount of Each Receipt this Period

228.00

P/R Deduction (\$19.00 Bi-Weekly)

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

1010.00

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

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

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

FOR LINE NUMBER: PAGE 16 / 199

(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 Michigan PAC

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

Michael Malec

Mailing Address 25505 Green Ct

City State Zip Code  
 Warren MI 48089-1012

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1933688217245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Tricia Keith

Mailing Address 1918 Lloyd Ave

City State Zip Code  
 Royal Oak MI 48073-3803

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1933690117245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

James Pranschke

Mailing Address 36025 Grennada

City State Zip Code  
 Livonia MI 48154-5241

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1933693317245

Amount of Each Receipt this Period

290.00

P/R Deduction (\$29.00 Bi-Weekly)

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

1252.00

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



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

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

FOR LINE NUMBER: PAGE 17 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Faisal Khan  
Mailing Address 1091 Beaver Run

City State Zip Code  
Troy MI 48083-5458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1933697117245

Amount of Each Receipt this Period

234.00

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

**B.** Full Name (Last, First, Middle Initial)  
Thomas Kerr  
Mailing Address 38421 Elsie

City State Zip Code  
Livonia MI 48154-4803

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1991789117245

Amount of Each Receipt this Period

234.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mary Moore  
Mailing Address 7732 Hipp

City State Zip Code  
Taylor MI 48180-2613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2083466317245

Amount of Each Receipt this Period

234.00

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

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

702.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 199

(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 Michigan PAC

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

Sharon Gipson

Mailing Address 28410 Lake Park Dr

City State Zip Code  
Farmington Hills MI 48331-2644

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2139035017245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Raymond Sohn Jr

Mailing Address 1029 Rock Spring Road

City State Zip Code  
Bloomfield Hills MI 48304-3145

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2143520317245

Amount of Each Receipt this Period

228.00

P/R Deduction (\$19.00 Bi-Weekly)

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

Jeffrey Connolly

Mailing Address 9684 Echo Valley Dr

City State Zip Code  
Traverse City MI 49684-9708

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2150990717245

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-Weekly)

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

1325.00

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

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

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

FOR LINE NUMBER: PAGE 19 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Kristen Kangas-Kraft  
Mailing Address 1219 S Swegles St

City State Zip Code  
Saint Johns MI 48879-2321

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2161835217245

Amount of Each Receipt this Period

290.00

P/R Deduction (\$29.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Kurt Barr  
Mailing Address 20931 Kenmore

City State Zip Code  
Harper Woods MI 48225-1700

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2161837217245

Amount of Each Receipt this Period

261.00

P/R Deduction (\$29.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Christine Farah  
Mailing Address 9000 Fellows Creek Dr

City State Zip Code  
Plymouth MI 48170-6354

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2161841217245

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

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

1091.00

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

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

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

FOR LINE NUMBER: PAGE 20 / 199

(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 Michigan PAC

|   |  |   |  |  |
|---|--|---|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Laurie Westfall  |  |   | Date of Receipt<br><div> <div>M M / D D / Y Y Y Y Y</div> </div> |  |
| Mailing Address 3100 N Milford Rd   |  |   | <b>Transaction ID:</b> PR2161842417245                           |  |
| City Highland State MI Zip Code 48357-3549  |  |   | Amount of Each Receipt this Period<br><div>780.00</div>          |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |  |
| Name of Employer<br>Blue Cross and Blue Shield of Michigan  |  | Occupation<br>VP                              |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br><div>780.00</div> |  |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Melissa Frankel-Wagner   |  |   | Date of Receipt<br><div> <div>M M / D D / Y Y Y Y Y</div> </div> |  |
| Mailing Address 67875 Pinewood Ln   |  |   | <b>Transaction ID:</b> PR2161842917245                           |  |
| City Richmond State MI Zip Code 48062-5904  |  |   | Amount of Each Receipt this Period<br><div>270.00</div>          |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |  |
| Name of Employer<br>Blue Cross and Blue Shield of Michigan  |  | Occupation<br>VP                              |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br><div>270.00</div> |  |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Robert Milewski  |  |   | Date of Receipt<br><div> <div>M M / D D / Y Y Y Y Y</div> </div> |  |
| Mailing Address 59769 Glacier Club Dr   |  |   | <b>Transaction ID:</b> PR2163136417245                           |  |
| City Washngtn Twp State MI Zip Code 48094-2287  |  |   | Amount of Each Receipt this Period<br><div>600.00</div>          |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |  |  |
| Name of Employer<br>Blue Cross and Blue Shield of Michigan  |  | Occupation<br>SVP                             |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br><div>600.00</div> |  |  |

P/R Deduction (\$60.00 Bi-Weekly)

P/R Deduction (\$45.00 Bi-Weekly)

P/R Deduction (\$60.00 Bi-Weekly)

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

**1650.00**

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

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

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

FOR LINE NUMBER: PAGE 21 / 199

(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 Michigan PAC

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

James Lang

Mailing Address 9050 Carter Dr

City State Zip Code  
 Saline MI 48176-8006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2212084717245

Amount of Each Receipt this Period

405.00

P/R Deduction (\$45.00 Bi-Weekly)

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

Darrell Middleton

Mailing Address 5669 Shore Dr

City State Zip Code  
 Orchard Lake MI 48324-2966

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2212084817245

Amount of Each Receipt this Period

540.00

P/R Deduction (\$60.00 Bi-Weekly)

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

Keith Adkins

Mailing Address 4371 Fieldview

City State Zip Code  
 Grand Ledge MI 48837-8191

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Accident Fund Company

Occupation  
VP, Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2212272517245

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

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

1485.00

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

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

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

FOR LINE NUMBER: PAGE 22 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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 Michigan PAC

|   |       |   |   |  |
|---|-------|---|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Michael Britt  |       |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>Transaction ID: PR2212274117245 |  |
| Mailing Address 5439 Timberbend Drive   |       |   | Amount of Each Receipt this Period<br>660.00                                |  |
| City  | State | Zip Code                                  |   |  |
| Brighton  | MI    | 48116-4796                                |   |  |
| FEC ID number of contributing federal political committee.<br>C   |       |   |   |  |
| Name of Employer<br>Accident Fund Company   |       | Occupation<br>Ex VP, Insurance Operations |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |       | Aggregate Year-to-Date ▼<br>660.00        | P/R Deduction (\$60.00 Bi-Weekly)   |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Stephan Cooper   |       |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>Transaction ID: PR2212276617245 |  |
| Mailing Address 6456 Island Lake Drive  |       |   | Amount of Each Receipt this Period<br>585.00                                |  |
| City  | State | Zip Code                                  |   |  |
| East Lansing  | MI    | 48823-9735                                |   |  |
| FEC ID number of contributing federal political committee.<br>C   |       |   |   |  |
| Name of Employer<br>Accident Fund Company   |       | Occupation<br>Vice President, Claims      |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |       | Aggregate Year-to-Date ▼<br>585.00        | P/R Deduction (\$45.00 Bi-Weekly)   |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Lisa Domagalski  |       |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>Transaction ID: PR2212277717245 |  |
| Mailing Address PO Box 161  |       |   | Amount of Each Receipt this Period<br>377.00                                |  |
| City  | State | Zip Code                                  |   |  |
| Laingsburg  | MI    | 48848-0161                                |   |  |
| FEC ID number of contributing federal political committee.<br>C   |       |   |   |  |
| Name of Employer<br>Accident Fund Company   |       | Occupation<br>VP, Corporate Events        |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |       | Aggregate Year-to-Date ▼<br>377.00        | P/R Deduction (\$29.00 Bi-Weekly)   |  |

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

1622.00

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

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

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

FOR LINE NUMBER: PAGE 23 / 199

(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 Michigan PAC

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

Eugenio Fernandez

Mailing Address 1015 E. Geneva Drive

City State Zip Code  
Dewitt MI 48820-9579

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Accident Fund Company

Occupation  
Vice President Info Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2212279017245

Amount of Each Receipt this Period

495.00

P/R Deduction (\$45.00 Bi-Weekly)

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

Steven Hess

Mailing Address 5290 Park Lake Road

City State Zip Code  
East Lansing MI 48823-3800

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Accident Fund Company

Occupation  
EVP, General Counsel & Corp Sec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2212283017245

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-Weekly)

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

Richard Holland

Mailing Address 1225 Blanchette Dr

City State Zip Code  
East Lansing MI 48823-1878

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Accident Fund Company

Occupation  
VP Quality Improvement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2212283817245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

1800.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

A. Wayne Jackson

Mailing Address 2321 Cumberland Road

City State Zip Code  
 Lansing MI 48906-3724

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Accident Fund Company

Occupation  
Director, Employee Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2212284917245

Amount of Each Receipt this Period

209.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Jennifer Nash

Mailing Address 5815 Bent Tree

City State Zip Code  
 East Lansing MI 48823-7789

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Accident Fund Company

Occupation  
Vice President Employee Svs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2212290917245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Anthony Phillips

Mailing Address 8697 North Hills Ct.

City State Zip Code  
 Howell MI 48843-6126

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Accident Fund Company

Occupation  
VP and Chief Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2212292817245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

1171.00

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



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

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

FOR LINE NUMBER: PAGE 25 / 199

(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 Michigan PAC

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

Steven Reynolds

Mailing Address 12416 Golden Oaks Dr

City State Zip Code  
 Milford MI 48380-1254

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Accident Fund Company

Occupation  
VP Innovation & Planning

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2212294817245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

Ronald Schoen

Mailing Address 9050 East Parker Road

City State Zip Code  
 Laingsburg MI 48848-9646

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Accident Fund Company

Occupation  
Executive VP & CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2212296317245

Amount of Each Receipt this Period

495.00

P/R Deduction (\$45.00 Bi-Weekly)

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

Michael Sekoni

Mailing Address 16590 Broadview Dr.

City State Zip Code  
 East Lansing MI 48823-9628

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Accident Fund Company

Occupation  
VP & General Auditor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR2212297017245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

1665.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 199

(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 Michigan PAC

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

Melanie Fraczek

Mailing Address 14308 Brookings Dr

City State Zip Code  
 Sterling Heights MI 48313-5414

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824754517245

Amount of Each Receipt this Period

234.00

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

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

Mary A Smith

Mailing Address 10058 King Rd

City State Zip Code  
 Davisburg MI 48350-1900

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824755617245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

William T Allen

Mailing Address 602 W Houstonia

City State Zip Code  
 Royal Oak MI 48073-4082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824759717245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

1196.00

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

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

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

FOR LINE NUMBER: PAGE 27 / 199

(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 Michigan PAC

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

Joseph M Miko

Mailing Address 42421 Ehrke

City

Clinton Township

State

MI

Zip Code

48038-3612

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824769917245

Amount of Each Receipt this Period

234.00

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

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

Warren S Sylvertooth

Mailing Address 530 S Piper Ct

City

Detroit

State

MI

Zip Code

48215-3295

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824772417245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Kimberley C Scicluna

Mailing Address 23124 Liberty

City

Saint Clair Shores

State

MI

Zip Code

48080-1503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824772517245

Amount of Each Receipt this Period

234.00

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

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

845.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Marie T Ulmer  
Mailing Address 19972 E Clairview Ct

City State Zip Code  
Grosse Pointe Wood MI 48236-2304

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824774717245

Amount of Each Receipt this Period

234.00

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

**B.** Full Name (Last, First, Middle Initial)  
Patricia J Davidson  
Mailing Address 720 Fifth St

City State Zip Code  
Ann Arbor MI 48103-4843

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824775217245

Amount of Each Receipt this Period

234.00

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

**C.** Full Name (Last, First, Middle Initial)  
Helen Stojc  
Mailing Address 28 Elm Park Blvd

City State Zip Code  
Pleasant Ridge MI 48069-1105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824776117245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

845.00

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

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

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

FOR LINE NUMBER: PAGE 29 / 199

(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 Michigan PAC

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

Yvonne Johnson

Mailing Address 27162 Charles Ct

City State Zip Code  
 Southfield MI 48076-3118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824776317245

Amount of Each Receipt this Period

234.00

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

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

Diane M Meakin

Mailing Address 34790 St Martins

City State Zip Code  
 Livonia MI 48152-1113

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824778117245

Amount of Each Receipt this Period

234.00

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

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

Daniel R LaPonsie

Mailing Address 2553 Bonito

City State Zip Code  
 Troy MI 48085-3923

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR82477817245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

845.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
DeAndre A Lipscomb

Mailing Address 14860 Grandville Ave

City State Zip Code  
 Detroit MI 48223-2233

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824778917245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
James E Negro

Mailing Address 5270 Inverrary Ln

City State Zip Code  
 Commerce Twp MI 48382-1048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824782017245

Amount of Each Receipt this Period

416.00

P/R Deduction (\$32.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Deanne E Seifert

Mailing Address 5517 Kingfield Dr

City State Zip Code  
 West Bloomfield MI 48322-1459

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824782317245

Amount of Each Receipt this Period

234.00

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

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

897.00

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

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

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

FOR LINE NUMBER: PAGE 31 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

A. Joseph G Lieblang

Mailing Address 22337 Tenny

City

Dearborn

State

MI

Zip Code

48124-2744

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation  
DIRECTOR

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824783317245

Amount of Each Receipt this Period

390.00

P/R Deduction (\$30.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Doreen J Saputo

Mailing Address 12728 Beresford

City

Sterling Heights

State

MI

Zip Code

48313-4110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation  
MANAGER

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824783717245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

C. William A Elwell

Mailing Address 23276 Evan Ct N

City

New Boston

State

MI

Zip Code

48164-8504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation  
DIRECTOR

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824783817245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

1001.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 199

(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 Michigan PAC

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

Jon B Ogar

Mailing Address 2026 Arbor Meadows Dr

City State Zip Code  
Dewitt MI 48820-8842

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824784417245

Amount of Each Receipt this Period

234.00

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

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

Richard T Theisen

Mailing Address 23250 Cheltenham Ln

City State Zip Code  
Dearborn Heights MI 48127-2365

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824785117245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Diane G Brookins

Mailing Address 19756 Magnolia Pkwy

City State Zip Code  
Southfield MI 48075-7312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824785717245

Amount of Each Receipt this Period

234.00

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

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

845.00

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



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

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

FOR LINE NUMBER: PAGE 33 / 199

(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 Michigan PAC

|  |  |  |  |
|--|--|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Lisa M Varnier<br>Mailing Address 4139 Wakefield<br>City State Zip Code<br>Berkley MI 48072-3463<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer<br>Blue Cross and Blue Shield of Michigan<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Occupation<br>DIRECTOR<br>Aggregate Year-to-Date ▼<br>377.00    |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR824786017245<br>Amount of Each Receipt this Period<br>377.00<br>P/R Deduction (\$29.00 Bi-Weekly) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Amy B Tattre<br>Mailing Address 951 Hampton Rd<br>City State Zip Code<br>Grosse Pointe Wood MI 48236-1341<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer<br>Blue Cross and Blue Shield of Michigan<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Occupation<br>VP<br>Aggregate Year-to-Date ▼<br>585.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR824786417245<br>Amount of Each Receipt this Period<br>585.00<br>P/R Deduction (\$45.00 Bi-Weekly) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Timothy P Cook<br>Mailing Address 4148 Stamper Way<br>City State Zip Code<br>Howell MI 48855-3977<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer<br>Blue Cross and Blue Shield of Michigan<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Occupation<br>MANAGER<br>Aggregate Year-to-Date ▼<br>234.00    |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR824786917245<br>Amount of Each Receipt this Period<br>234.00<br>P/R Deduction (\$18.00 Bi-Weekly) |

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

**1196.00**

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

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

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

FOR LINE NUMBER: PAGE 34 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Amy E Modlin

Mailing Address 2312 Fort William Dr

City State Zip Code  
 Olney MD 20832-1665

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824787417245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.** Mark A Cook

Mailing Address 1121 Lone Oak Dr

City State Zip Code  
 Mason MI 48854-8714

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824787517245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C.** Laura D Walker

Mailing Address 26192 Summerdale Dr  
 Bldg 12 Unit 92

City State Zip Code  
 Southfield MI 48033-6135

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824788217245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

1339.00

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

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

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

FOR LINE NUMBER: PAGE 35 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** John J Hays

Mailing Address 1645 Roseland Ave

City State Zip Code  
East Lansing MI 48823-4751

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
**DIRECTOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR824790017245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.** Billie J Lyons

Mailing Address 911 Belknap

City State Zip Code  
Grand Ledge MI 48837-2069

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
**MANAGER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR824790517245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

**C.** Mary A Mackenzie

Mailing Address 1534 Creal Crescent

City State Zip Code  
Ann Arbor MI 48103-2420

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
**DIRECTOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR824791217245

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

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

**959.00**

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

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

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

FOR LINE NUMBER: PAGE 36 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Richard R Weiser  
Mailing Address 1939 Oneida Drive

City State Zip Code  
Okemos MI 48864-2147

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR824791317245

Amount of Each Receipt this Period

290.00

P/R Deduction (\$29.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Richard F Zapala  
Mailing Address 1915 Creek Landing

City State Zip Code  
Haslett MI 48840-8704

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR824791417245

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Clyde W Scott  
Mailing Address 20636 Maple Lane

City State Zip Code  
Grosse Pointe Wood MI 48236-1524

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR824791517245

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

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

986.00

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

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

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

FOR LINE NUMBER: PAGE 37 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** John R Ganos

Mailing Address 316 Abbeywood Dr.

City State Zip Code  
 Rochester MI 48306-2602

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824791617245

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.** Marsha L Tracy

Mailing Address 12451 Oakland Hills

City State Zip Code  
 Dewitt MI 48820-8302

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824791717245

Amount of Each Receipt this Period

290.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C.** Laurine Symula Parmely

Mailing Address 5772 Martell Drive

City State Zip Code  
 Troy MI 48085-3160

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824791917245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

1015.00

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

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

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

FOR LINE NUMBER: PAGE 38 / 199

(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 Michigan PAC

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

Jeffrey P Rumley

Mailing Address 951 Hampton Rd

City State Zip Code  
 Grosse Pointe Wood MI 48236-1341

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824792317245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

Colleen C Cohan

Mailing Address 17381 Ego

City State Zip Code  
 Eastpointe MI 48021-3101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824792417245

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Teresa Mikan

Mailing Address 1231 White Oaks

City State Zip Code  
 Okemos MI 48864-3067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824792617245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

1310.00

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

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

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

FOR LINE NUMBER: PAGE 39 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Frank Westley Jackson  
Mailing Address 18664 Birchcrest

City State Zip Code  
Detroit MI 48221-2225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824792817245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Daniel W Mckelvey  
Mailing Address 4404 Cherry Hill

City State Zip Code  
Okemos MI 48864-2914

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824793117245

Amount of Each Receipt this Period

232.00

P/R Deduction (\$29.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Michael T Zajac  
Mailing Address 53965 Sutherland Ct

City State Zip Code  
Shelby Township MI 48316-1231

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824793517245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

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

856.00

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

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

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

FOR LINE NUMBER: PAGE 40 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Joseph W Murray

Mailing Address 22325 Yale St

City

Saint Clair Shores

State

MI

Zip Code

48081-2039

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824793717245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.** Bart M Feinbaum

Mailing Address 30351 Southampton Ln

City

Farmington Hills

State

MI

Zip Code

48331-1727

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824794017245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C.** Robert A Phillips

Mailing Address 5444 Green Way

City

Trenton

State

MI

Zip Code

48183-7206

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824794117245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

1131.00

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



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

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

FOR LINE NUMBER: PAGE 41 / 199

(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 Michigan PAC

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

Kevin M Stanko

Mailing Address 2233 Camelot Drive

City State Zip Code  
Troy MI 48083-2556

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824794717245

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Leo A Nouhan

Mailing Address 1326 Yorkshire

City State Zip Code  
Grosse Pointe Park MI 48230-1108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824794817245

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Matthew A Case

Mailing Address 9370 Big Hand Rd

City State Zip Code  
Columbus MI 48063-3013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824794917245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

1073.00

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

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

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

FOR LINE NUMBER: PAGE 42 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Sue E Jenkins

Mailing Address 2391 Forest Oak Trl

City State Zip Code  
 Williamston MI 48895-9032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824795317245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.** Scott A Whipple

Mailing Address 7427 Fenton

City State Zip Code  
 Dearborn Hts MI 48127-1751

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824795717245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C.** Gregory W Anderson

Mailing Address 37161 Chesapeake

City State Zip Code  
 Farmington Hills MI 48335-1142

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824797417245

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

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

1294.00

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

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

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

FOR LINE NUMBER: PAGE 43 / 199

(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 Michigan PAC

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

Douglas R Cedras

Mailing Address 2616 Mcclintock

City State Zip Code  
 Bloomfield MI 48302-0756

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824798117245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Diane S Cesarz

Mailing Address 18525 Shadyside St

City State Zip Code  
 Livonia MI 48152-3245

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824801417245

Amount of Each Receipt this Period

234.00

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

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

Barbara A Brown-Cadovich

Mailing Address 356 Falling Brook Dr

City State Zip Code  
 Troy MI 48098-4646

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824801617245

Amount of Each Receipt this Period

234.00

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

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

845.00

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

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

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

FOR LINE NUMBER: PAGE 44 / 199

(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 Michigan PAC

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

Dawn J Geisert

Mailing Address 55907 Nicholas Dr

City State Zip Code  
 Shelby Township MI 48316-5817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824804217245

Amount of Each Receipt this Period

234.00

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

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

Kimberly A Winnik

Mailing Address 18162 Cascade Dr

City State Zip Code  
 Northville MI 48168-3286

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824804717245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Frank J Slisinger

Mailing Address 34518 Morningdale Dr

City State Zip Code  
 Sterling Heights MI 48312-5744

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824805117245

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

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

959.00

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

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

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

FOR LINE NUMBER: PAGE 45 / 199

(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 Michigan PAC

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

Deborah A Fritz-Elliott

Mailing Address 9112 Deer Trail

City State Zip Code  
 Brighton MI 48114-7567

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824805417245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Asha M Kulkarni

Mailing Address 48045 Ben Franklin

City State Zip Code  
 Shelby Township MI 48315-4125

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

489.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824807017245

Amount of Each Receipt this Period

489.00

P/R Deduction (\$45.00 Bi-Weekly)

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

Richard J Werther

Mailing Address 45171 Courtview Trl

City State Zip Code  
 Novi MI 48375-3861

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
OTHER NON-EXEMPT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824808417245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

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

1113.00

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

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

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

FOR LINE NUMBER: PAGE 46 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Dennis M Winkler

Mailing Address 2888 Kilburn Ct

City State Zip Code  
Rochester Hills MI 48306-3025

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR824809017245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Sondra J Smith

Mailing Address 2914 Bamlet Rd

City State Zip Code  
Royal Oak MI 48073-2979

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR824811117245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Robin G Mynhier

Mailing Address 3257 Outback Trl

City State Zip Code  
Pinckney MI 48169-8876

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR824811917245

Amount of Each Receipt this Period

234.00

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

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

858.00

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

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

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

FOR LINE NUMBER: PAGE 47 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Michelle Billingsley

Mailing Address 12900 East Outer Drive

City State Zip Code  
 Detroit MI 48224-2731

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824812217245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.** Tonya L Hadnot

Mailing Address 10331 Dartmouth

City State Zip Code  
 Oak Park MI 48237-1705

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824812617245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C.** Jeffrey D Denhard

Mailing Address 5644 Cliffside Drive

City State Zip Code  
 Troy MI 48085-3845

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824813617245

Amount of Each Receipt this Period

234.00

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

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

858.00

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

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

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

FOR LINE NUMBER: PAGE 48 / 199

(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 Michigan PAC

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

Douglas E Darland

Mailing Address 529 Burtman

City State Zip Code  
Troy MI 48083-1042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824814417245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Philip D Bone

Mailing Address 1497 Heights Rd

City State Zip Code  
Lake Orion MI 48362-2212

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824814817245

Amount of Each Receipt this Period

234.00

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

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

Bonnie K Harrington

Mailing Address 3468 Shaddick

City State Zip Code  
Waterford MI 48328-2560

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824815217245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

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

858.00

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



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

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

FOR LINE NUMBER: PAGE 49 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)

Robert J Galac

Mailing Address 693 Bolinger

City State Zip Code  
 Rochester Hills MI 48307-2820

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824815417245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Kathleen M Schummer

Mailing Address 1540 Oxford

City State Zip Code  
 Grosse Pointe Wood MI 48236-1844

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824817117245

Amount of Each Receipt this Period

234.00

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

**C.** Full Name (Last, First, Middle Initial)

Barbara G Derian

Mailing Address 2403 Sanders Place

City State Zip Code  
 Bloomfield MI 48302-0460

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824817217245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

988.00

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

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

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

FOR LINE NUMBER: PAGE 50 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)

Nathan P Foco

Mailing Address 1927 Fern St

City State Zip Code  
 Royal Oak MI 48073-4185

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824819217245

Amount of Each Receipt this Period

216.00

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

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

Harold R Drake

Mailing Address 3045 Lessiter Dr

City State Zip Code  
 Lake Orion MI 48360-1523

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824819717245

Amount of Each Receipt this Period

234.00

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

**C.** Full Name (Last, First, Middle Initial)

Donna L Waller

Mailing Address 894 Avon Court

City State Zip Code  
 Grosse Pointe Wood MI 48236-1239

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824820517245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

827.00

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

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

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

FOR LINE NUMBER: PAGE 51 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Brenda L Storie  
Mailing Address 30060 Lamplighter

City State Zip Code  
New Hudson MI 48165-9679

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824821217245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Jeffrey M Witzburg  
Mailing Address 9650 Winterset Circle

City State Zip Code  
Plymouth MI 48170-3273

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824826417245

Amount of Each Receipt this Period

234.00

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

**C.** Full Name (Last, First, Middle Initial)  
Sandra F Rowe  
Mailing Address 29056 Tiffany Dr E

City State Zip Code  
Southfield MI 48034-4532

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824826717245

Amount of Each Receipt this Period

234.00

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

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

715.00

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

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

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

FOR LINE NUMBER: PAGE 52 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Joyce M Meyer

Mailing Address 2264 Creek Bend

City

Rochester Hills

State

MI

Zip Code

48309-4730

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR824827217245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

**B.** Joan M Budden

Mailing Address 3820 Woodlake Dr

City

Bloomfield Hills

State

MI

Zip Code

48304-3074

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR824827417245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C.** Carol L Purdy

Mailing Address 36989 Fox Glen

City

Farmington Hills

State

MI

Zip Code

48331-1803

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR824827917245

Amount of Each Receipt this Period

234.00

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

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

1053.00

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

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

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

FOR LINE NUMBER: PAGE 53 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)

Donna D Stache

Mailing Address 3640 Worthington Ct

City State Zip Code  
 Rochester Hills MI 48309-1180

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824828917245

Amount of Each Receipt this Period

234.00

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

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

Frank A Maslowski

Mailing Address 5160 Mead

City State Zip Code  
 Dearborn MI 48126-3018

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824829817245

Amount of Each Receipt this Period

234.00

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

**C.** Full Name (Last, First, Middle Initial)

Gerald W Noxon

Mailing Address 22745 Huron River Dr

City State Zip Code  
 New Boston MI 48164-9439

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824830017245

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

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

816.00

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

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

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

FOR LINE NUMBER: PAGE 54 / 199

(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 Michigan PAC

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

Mailing Address 2397 Rockport Ct

City State Zip Code  
Ann Arbor MI 48103-8911

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824833017245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Michelle T Grove

Mailing Address 46191 Burning Tree Ln

City State Zip Code  
Plymouth MI 48170-3587

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824833517245

Amount of Each Receipt this Period

234.00

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

**C.** Full Name (Last, First, Middle Initial)

Joan T Vercammen

Mailing Address 6865 Northpointe Ct.

City State Zip Code  
Troy MI 48065-1209

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824841617245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

988.00

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

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

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

FOR LINE NUMBER: PAGE 55 / 199

(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 Michigan PAC

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

Michael A Mattei

Mailing Address 6088 Glen Eagles

City State Zip Code  
 West Bloomfield MI 48323-2212

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824841917245

Amount of Each Receipt this Period

234.00

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

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

James E Wroe

Mailing Address 46510 Killarney Cir

City State Zip Code  
 Canton MI 48188-3505

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824842917245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Thomas A Marquard

Mailing Address 24516 Rockford

City State Zip Code  
 Dearborn MI 48124-1333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824845217245

Amount of Each Receipt this Period

234.00

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

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

845.00

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

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

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

FOR LINE NUMBER: PAGE 56 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Linda L Garrison  
Mailing Address 5536 Victory Circle

City State Zip Code  
Sterling Hts MI 48310-7700

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR824846017245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Willie E Brooks Jr  
Mailing Address 936 Majestic

City State Zip Code  
Rochester Hills MI 48306-3575

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR824847317245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Catherine D Schmitt  
Mailing Address 2731 Thedford

City State Zip Code  
Bloomfield Hills MI 48304-2057

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR824848817245

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

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

1502.00

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



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

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

FOR LINE NUMBER: PAGE 57 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Vickianne Harbowy

Mailing Address 16092 Swathmore Ct North

City Livonia State MI Zip Code 48154-1005

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824850217245

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.** Michael F Gurney

Mailing Address 36648 Almond Circle

City Farmington Hills State MI Zip Code 48335-3812

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824850417245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C.** James H Burgin Jr

Mailing Address 8919 Royce Dr

City Sterling Heights State MI Zip Code 48313-3210

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824851917245

Amount of Each Receipt this Period

234.00

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

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

959.00

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

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

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

FOR LINE NUMBER: PAGE 58 / 199

(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 Michigan PAC

|  |  |  |  |
|--|--|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Elizabeth R Lepoutre<br>Mailing Address 36552 Catalpa Ln<br>City New Baltimore State MI Zip Code 48047-5575<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Blue Cross and Blue Shield of Michigan<br>Occupation MANAGER<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 234.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR824852317245<br>Amount of Each Receipt this Period<br>234.00<br>P/R Deduction (\$18.00 Bi-Weekly) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>John D Mc Crary<br>Mailing Address 257 Bourbon Court<br>City Rochester Hills State MI Zip Code 48307-3801<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Blue Cross and Blue Shield of Michigan<br>Occupation MANAGER<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 234.00   |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR824853517245<br>Amount of Each Receipt this Period<br>234.00<br>P/R Deduction (\$18.00 Bi-Weekly) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Kathleen M Arndt<br>Mailing Address 6119 Radnor Street<br>City Detroit State MI Zip Code 48224-1365<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Blue Cross and Blue Shield of Michigan<br>Occupation MANAGER<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 234.00         |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR824854317245<br>Amount of Each Receipt this Period<br>234.00<br>P/R Deduction (\$18.00 Bi-Weekly) |

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

702.00

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

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

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

FOR LINE NUMBER: PAGE 59 / 199

(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 Michigan PAC

|   |  |   |  |  |
|---|--|---|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Luzine Brister   |  |   | Date of Receipt<br><div> <div>M M / D D / Y Y Y Y Y</div> </div> |  |
| Mailing Address 17145 Strathmoor  |  |   | <b>Transaction ID:</b> PR824855917245                            |  |
| City State Zip Code<br>Detroit MI 48235-3919  |  |   | Amount of Each Receipt this Period<br><div>377.00</div>          |  |
| FEC ID number of contributing federal political committee.<br><div>C</div>  |  |   |  |  |
| Name of Employer<br>Blue Cross and Blue Shield of Michigan  |  | Occupation<br>DIRECTOR                        |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br><div>377.00</div> |  |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Brian D Armstrong  |  |   | Date of Receipt<br><div> <div>M M / D D / Y Y Y Y Y</div> </div> |  |
| Mailing Address 1363 North Creek Dr   |  |   | <b>Transaction ID:</b> PR824856017245                            |  |
| City State Zip Code<br>Wixom MI 48393-1638  |  |   | Amount of Each Receipt this Period<br><div>585.00</div>          |  |
| FEC ID number of contributing federal political committee.<br><div>C</div>  |  |   |  |  |
| Name of Employer<br>Blue Cross and Blue Shield of Michigan  |  | Occupation<br>VP                              |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br><div>585.00</div> |  |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Rick V Morrone   |  |   | Date of Receipt<br><div> <div>M M / D D / Y Y Y Y Y</div> </div> |  |
| Mailing Address 3751 Parker   |  |   | <b>Transaction ID:</b> PR824857517245                            |  |
| City State Zip Code<br>Dearborn MI 48124-3557   |  |   | Amount of Each Receipt this Period<br><div>585.00</div>          |  |
| FEC ID number of contributing federal political committee.<br><div>C</div>  |  |   |  |  |
| Name of Employer<br>Blue Cross and Blue Shield of Michigan  |  | Occupation<br>VP                              |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br><div>585.00</div> |  |  |

P/R Deduction (\$29.00 Bi-Weekly)

P/R Deduction (\$45.00 Bi-Weekly)

P/R Deduction (\$45.00 Bi-Weekly)

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

**1547.00**

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

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

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

FOR LINE NUMBER: PAGE 60 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Richard J Burgess  
Mailing Address 5163 Springdale Ct

City State Zip Code  
Clarkston MI 48348-5039

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824858217245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Annette M Sabatella  
Mailing Address 411 Saddle Lane

City State Zip Code  
Grosse Pointe Wood MI 48236-2728

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824858517245

Amount of Each Receipt this Period

234.00

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

**C.** Full Name (Last, First, Middle Initial)  
Carol E Gawronski  
Mailing Address 12240 Rohn Road

City State Zip Code  
Fenton MI 48430-9519

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824859817245

Amount of Each Receipt this Period

234.00

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

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

845.00

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

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

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

FOR LINE NUMBER: PAGE 61 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)

Craig A Smith

Mailing Address 7141 Placita Ct.

City State Zip Code  
 Grand Rapids MI 49546-7234

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824860117245

Amount of Each Receipt this Period

234.00

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

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

Gregory A Mays

Mailing Address 33865 Trillium Court

City State Zip Code  
 Livonia MI 48150-3685

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824860217245

Amount of Each Receipt this Period

234.00

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

**C.** Full Name (Last, First, Middle Initial)

Gary R Gavin

Mailing Address 23784 Wintergreen

City State Zip Code  
 Novi MI 48374-3680

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

569.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824862117245

Amount of Each Receipt this Period

569.00

P/R Deduction (\$45.00 Bi-Weekly)

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

1037.00

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

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

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

FOR LINE NUMBER: PAGE 62 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Julia M Kuks

Mailing Address 1073 Magnolia

City

Inkster

State

MI

Zip Code

48141-1731

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824864517245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

**B.** Martha M Spenny

Mailing Address 23633 Berg Rd

City

Southfield

State

MI

Zip Code

48033-4146

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824864617245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C.** Camille K Forster

Mailing Address 9035 Woodlore South Dr.

City

Plymouth

State

MI

Zip Code

48170-3499

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824865417245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

988.00

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

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

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

FOR LINE NUMBER: PAGE 63 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)

Lisa D Mulligan

Mailing Address 5529 Amber Way

City State Zip Code  
 Ypsilanti MI 48197-8207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824866417245

Amount of Each Receipt this Period

234.00

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

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

Lawrence G Hoffman

Mailing Address 6872 Cedarbrook Dr

City State Zip Code  
 Bloomfield Hills MI 48301-3017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824888617245

Amount of Each Receipt this Period

234.00

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

**C.** Full Name (Last, First, Middle Initial)

Kathleen P Wodecki

Mailing Address 7640 Barnsbury

City State Zip Code  
 West Bloomfield MI 48324-3612

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824892217245

Amount of Each Receipt this Period

234.00

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

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

702.00

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

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

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

FOR LINE NUMBER: PAGE 64 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

A. Janet P Macqueen

Mailing Address 3214 Chesapeake Dr

City State Zip Code  
 Sterling Heights MI 48314-1869

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824899517245

Amount of Each Receipt this Period

780.00

P/R Deduction (\$60.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Thedford Waddell

Mailing Address 14460 Greenview

City State Zip Code  
 Detroit MI 48223-2992

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824902617245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

C. David W Bulmer

Mailing Address 11321 Morgan Street

City State Zip Code  
 Plymouth MI 48170-4436

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824908317245

Amount of Each Receipt this Period

234.00

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

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

1248.00

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



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

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

FOR LINE NUMBER: PAGE 65 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Annette M Robertson

Mailing Address 31264 Lund Ave

City State Zip Code  
 Warren MI 48093-7917

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824908617245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

**B.** Susan L Kuypers

Mailing Address 21524 Boyd Court

City State Zip Code  
 Macomb MI 48044-3068

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824914217245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C.** Richard J Phillips

Mailing Address 40101 W Huron River

City State Zip Code  
 Romulus MI 48174-4811

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824915217245

Amount of Each Receipt this Period

234.00

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

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

715.00

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

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

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

FOR LINE NUMBER: PAGE 66 / 199

(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 Michigan PAC

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

Susan Wilson

Mailing Address 42143 Pellston

City State Zip Code  
 Northville MI 48167-2413

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824918117245

Amount of Each Receipt this Period

234.00

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

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

John C Golding

Mailing Address 42211 Garfield Rd  
 Apt 136

City State Zip Code  
 Clinton Township MI 48038-1648

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824919517245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$45.00 Bi-Weekly)

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

Thomas S Fielitz

Mailing Address 39896 Rager Ct

City State Zip Code  
 Clinton Township MI 48038-3095

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824929217245

Amount of Each Receipt this Period

234.00

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

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

845.00

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

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

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

FOR LINE NUMBER: PAGE 67 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)

Laurence R Binder

Mailing Address 32300 Maryland

City State Zip Code  
 Livonia MI 48150-3814

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824930317245

Amount of Each Receipt this Period

234.00

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

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

Joanne F Rusch

Mailing Address 4171 Fallow

City State Zip Code  
 West Bloomfield MI 48323-1242

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824932717245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)

Kathryn L Wilson

Mailing Address 1361 Palmer

City State Zip Code  
 Plymouth MI 48170-2069

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824934517245

Amount of Each Receipt this Period

234.00

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

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

845.00

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

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

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

FOR LINE NUMBER: PAGE 68 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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 Michigan PAC

Full Name (Last, First, Middle Initial)

A. Thomas N Winkler

Mailing Address 2059 22 St

City

Wyandotte

State

MI

Zip Code

48192-3837

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824934717245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

B. Joseph D Kearney

Mailing Address 2391 Lexington Cir S

City

Canton

State

MI

Zip Code

48188-5907

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824935417245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Carolynn Walton

Mailing Address 5835 Pinecroft Dr.

City

West Bloomfield

State

MI

Zip Code

48322-1669

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824936217245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

1066.00

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

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

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

FOR LINE NUMBER: PAGE 69 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Piyush J Desai

Mailing Address 3620 Beechtree Ln

City

Okemos

State

MI

Zip Code

48864-3864

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824940117245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

**B.** Margaret A Myszkowski

Mailing Address 41804 Park Ridge

City

Novi

State

MI

Zip Code

48375-2643

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824946117245

Amount of Each Receipt this Period

211.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C.** Audrey J Harvey

Mailing Address 25465 Waycross

City

Southfield

State

MI

Zip Code

48033-2206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824951317245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

1030.00

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

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

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

FOR LINE NUMBER: PAGE 70 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Kenneth A Bluhm  
Mailing Address 6187 Brittany Tree

City State Zip Code  
Troy MI 48085-1085

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824951917245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Valerie L Keesee  
Mailing Address 3400 E Coon Lake Rd

City State Zip Code  
Howell MI 48843-9420

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824954117245

Amount of Each Receipt this Period

455.00

P/R Deduction (\$35.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Diana M Glaab  
Mailing Address 24805 Belton Ln

City State Zip Code  
Dearborn Heights MI 48127-1377

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824955517245

Amount of Each Receipt this Period

234.00

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

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

936.00

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

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

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

FOR LINE NUMBER: PAGE 71 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)

Daniel Mroz

Mailing Address 17094 Euclid

City State Zip Code  
 Allen Park MI 48101-2827

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824955617245

Amount of Each Receipt this Period

234.00

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

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

Dennis A Weiss

Mailing Address 44500 Louvert Court

City State Zip Code  
 Novi MI 48375-3943

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824955717245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)

Richard C Mathews

Mailing Address 281 Stephens Road

City State Zip Code  
 Grosse Pointe Farm MI 48236-3409

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824956717245

Amount of Each Receipt this Period

234.00

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

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

845.00

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

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

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

FOR LINE NUMBER: PAGE 72 / 199

(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 Michigan PAC

|  |  |  |  |
|--|--|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Dominick A Mitchell III<br>Mailing Address 41500 Ladywood Ct<br>City Northville State MI Zip Code 48168-2342<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Blue Cross and Blue Shield of Michigan<br>Occupation DIRECTOR<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 247.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR824959117245<br>Amount of Each Receipt this Period<br>247.00<br>P/R Deduction (\$19.00 Bi-Weekly) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Philip V Delia Jr<br>Mailing Address 19462 Mayfield Rd #202<br>City Livonia State MI Zip Code 48152-1383<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Blue Cross and Blue Shield of Michigan<br>Occupation MANAGER<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 234.00      |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR824959617245<br>Amount of Each Receipt this Period<br>234.00<br>P/R Deduction (\$18.00 Bi-Weekly) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Ronald Wood<br>Mailing Address 29225 Lake Park<br>City Farmington Hills State MI Zip Code 48331-2661<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Blue Cross and Blue Shield of Michigan<br>Occupation VP<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 306.00               |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR824959717245<br>Amount of Each Receipt this Period<br>306.00<br>P/R Deduction (\$45.00 Bi-Weekly) |

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

**787.00**

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



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

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

FOR LINE NUMBER: PAGE 73 / 199

(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 Michigan PAC

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

Cheryl B Lewis

Mailing Address 29555 Bermuda

City State Zip Code  
 Southfield MI 48076-5222

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824960417245

Amount of Each Receipt this Period

234.00

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

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

Curtis J Schoenjahn

Mailing Address 3660 Seney Dr

City State Zip Code  
 Lake Orion MI 48360-2706

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824962217245

Amount of Each Receipt this Period

234.00

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

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

Kenneth L Krisan

Mailing Address 1921 Dogwood Trail

City State Zip Code  
 Commerce Township MI 48390-3914

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824963917245

Amount of Each Receipt this Period

216.00

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

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

684.00

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

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

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

FOR LINE NUMBER: PAGE 74 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Diane M Wolfenden  
Mailing Address 34397 Orsini Dr.

City State Zip Code  
Sterling Heights MI 48312-5773

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824967817245

Amount of Each Receipt this Period

234.00

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

**B.** Full Name (Last, First, Middle Initial)  
John J Dunn  
Mailing Address 3153 Davenport

City State Zip Code  
Rochester Hills MI 48309-4283

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824968517245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Brian T Morris  
Mailing Address 5033 Eric Court

City State Zip Code  
Ann Arbor MI 48105-9263

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824969917245

Amount of Each Receipt this Period

650.00

P/R Deduction (\$50.00 Bi-Weekly)

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

1469.00

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

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

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

FOR LINE NUMBER: PAGE 75 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** James P Meidlinger

Mailing Address 1210 Minglewood Way

City State Zip Code  
 Ann Arbor MI 48103-3003

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
OTHER NON-EXEMPT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824970017245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

**B.** Erika Monroe

Mailing Address 15531 Brookstone Dr

City State Zip Code  
 Clinton Township MI 48035-1060

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824970317245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

**C.** Cheri A Lehto

Mailing Address 4035 Iverness Ln

City State Zip Code  
 West Bloomfield MI 48323-1714

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824971117245

Amount of Each Receipt this Period

234.00

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

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

702.00

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

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

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

FOR LINE NUMBER: PAGE 76 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Marilyn J Smith  
Mailing Address 2485 Kimberly Fair

City State Zip Code  
Rochester Hills MI 48309-2061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824971917245

Amount of Each Receipt this Period

234.00

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

**B.** Full Name (Last, First, Middle Initial)  
James D Mills  
Mailing Address 37753 Chase Ct

City State Zip Code  
Livonia MI 48150-5040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824972417245

Amount of Each Receipt this Period

234.00

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

**C.** Full Name (Last, First, Middle Initial)  
Claudia J Swink  
Mailing Address 4459 Forest Ave

City State Zip Code  
Waterford MI 48328-1113

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824973217245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

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

715.00

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

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

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

FOR LINE NUMBER: PAGE 77 / 199

(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 Michigan PAC

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

Cynthia E Dion

Mailing Address 41584 Stonehenge Manor

City State Zip Code  
 Clinton Township MI 48038-4642

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824973317245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

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

Debra S Ross

Mailing Address 1148 Jenna Dr

City State Zip Code  
 Davison MI 48423-3608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824973817245

Amount of Each Receipt this Period

234.00

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

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

Beverly J Lentz

Mailing Address 1921 Vineway  
Unit 35

City State Zip Code  
 Canton MI 48188-1852

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824973917245

Amount of Each Receipt this Period

216.00

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

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

697.00

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

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

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

FOR LINE NUMBER: PAGE 78 / 199

(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 Michigan PAC

|   |  |   |  |  |
|---|--|---|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Laura S Dancsok  |  |   | Date of Receipt<br><div> <div>M M / D D / Y Y Y Y Y</div> </div> |  |
| Mailing Address 8253 Colony Dr<br>#22   |  |   | <b>Transaction ID:</b> PR824974217245                            |  |
| City State Zip Code<br>Grosse Ile MI 48138-1733   |  |   | Amount of Each Receipt this Period<br><div>234.00</div>          |  |
| FEC ID number of contributing federal political committee.<br><div>C</div>  |  |   |  |  |
| Name of Employer<br>Blue Cross and Blue Shield of Michigan  |  | Occupation<br>MANAGER                         |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br><div>234.00</div> |  |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>David B Payne  |  |   | Date of Receipt<br><div> <div>M M / D D / Y Y Y Y Y</div> </div> |  |
| Mailing Address 383 Jonathan Dr   |  |   | <b>Transaction ID:</b> PR824976517245                            |  |
| City State Zip Code<br>Rochester Hills MI 48307-5262  |  |   | Amount of Each Receipt this Period<br><div>234.00</div>          |  |
| FEC ID number of contributing federal political committee.<br><div>C</div>  |  |   |  |  |
| Name of Employer<br>Blue Cross and Blue Shield of Michigan  |  | Occupation<br>MANAGER                         |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br><div>234.00</div> |  |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Cathy M Longo  |  |   | Date of Receipt<br><div> <div>M M / D D / Y Y Y Y Y</div> </div> |  |
| Mailing Address 30790 Plum Lane   |  |   | <b>Transaction ID:</b> PR824979117245                            |  |
| City State Zip Code<br>Madison Hts MI 48071-1504  |  |   | Amount of Each Receipt this Period<br><div>377.00</div>          |  |
| FEC ID number of contributing federal political committee.<br><div>C</div>  |  |   |  |  |
| Name of Employer<br>Blue Cross and Blue Shield of Michigan  |  | Occupation<br>DIRECTOR                        |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br><div>377.00</div> |  |  |

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

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

P/R Deduction (\$29.00 Bi-Weekly)

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

**845.00**

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

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

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

FOR LINE NUMBER: PAGE 79 / 199

(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 Michigan PAC

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

Douglas Paul Sargent

Mailing Address 9075 Blueberry Hill Court

City State Zip Code  
 Howell MI 48843-9087

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824987517245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

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

Mark J Giroux

Mailing Address 2127 Woodland Ave

City State Zip Code  
 Royal Oak MI 48073-3876

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824990717245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

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

Beth D Benson

Mailing Address 15860 Reedmere Ave

City State Zip Code  
 Beverly Hills MI 48025-5672

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824991817245

Amount of Each Receipt this Period

234.00

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

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

728.00

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

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

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

FOR LINE NUMBER: PAGE 80 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Barbara Viaene  
Mailing Address 4527 Vineyards Blvd

City State Zip Code  
Sterling Heights MI 48314-1844

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824992317245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Wesley Shasko  
Mailing Address 43828 Nowland Dr

City State Zip Code  
Canton MI 48188-1794

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824993217245

Amount of Each Receipt this Period

234.00

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

**C.** Full Name (Last, First, Middle Initial)  
Sharon A Hamilton  
Mailing Address 21466 Green Hill

City State Zip Code  
Farmington Hills MI 48335-4508

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR824995917245

Amount of Each Receipt this Period

234.00

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

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

715.00

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



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

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

FOR LINE NUMBER: PAGE 81 / 199

(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 Michigan PAC

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

Peggy S Gunns

Mailing Address 722 E Columbia St

City State Zip Code  
Mason MI 48854-1306

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825005517245

Amount of Each Receipt this Period

234.00

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

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

Anthony Joseph Russo

Mailing Address 23003 Brookdale

City State Zip Code  
Saint Clair Shores MI 48082-2138

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825006017245

Amount of Each Receipt this Period

260.00

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

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

Cheryl L Deuel

Mailing Address 5920 York Way

City State Zip Code  
East Lansing MI 48823-7750

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825006717245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

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

741.00

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

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

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

FOR LINE NUMBER: PAGE 82 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)

Carolyn D Cruse

Mailing Address 15329 Artesian

City State Zip Code  
 Detroit MI 48223-2266

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825006817245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

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

Seth A Crawford

Mailing Address 28736 Stonewall Court

City State Zip Code  
 Novi MI 48377-2720

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825011217245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)

Lisa R Susin

Mailing Address 42746 Bloomingdale

City State Zip Code  
 Sterling Heights MI 48314-2843

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825011517245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

871.00

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

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

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

FOR LINE NUMBER: PAGE 83 / 199

(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 Michigan PAC

|   |  |  |  |
|---|--|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Chris J Maier<br>Mailing Address 6061 Middle Lake Rd<br>City Clarkston State MI Zip Code 48346-2047<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Blue Cross and Blue Shield of Michigan<br>Occupation VP<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>585.00              |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR825018917245<br>Amount of Each Receipt this Period<br>585.00<br>P/R Deduction (\$45.00 Bi-Weekly) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Sean M Drate<br>Mailing Address 722 Albany<br>City Ferndale State MI Zip Code 48220-1829<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Blue Cross and Blue Shield of Michigan<br>Occupation MANAGER<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>234.00                    |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR825019117245<br>Amount of Each Receipt this Period<br>234.00<br>P/R Deduction (\$18.00 Bi-Weekly) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Sandra G Kempton<br>Mailing Address 19522 Northridge Bldg 2<br>City Northville State MI Zip Code 48167-2912<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Blue Cross and Blue Shield of Michigan<br>Occupation MANAGER<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>234.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR825021417245<br>Amount of Each Receipt this Period<br>234.00<br>P/R Deduction (\$18.00 Bi-Weekly) |

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

1053.00

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

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

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

FOR LINE NUMBER: PAGE 84 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)

Kirk W Vogelei

Mailing Address 1304 Kinlock

City State Zip Code  
Troy MI 48098-2041

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825028317245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Rosemary Slaughter

Mailing Address 4129 Yorkshire

City State Zip Code  
Detroit MI 48224-2327

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825028817245

Amount of Each Receipt this Period

234.00

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

**C.** Full Name (Last, First, Middle Initial)

Kimberly A Jones-Schneider

Mailing Address 1219 Chelsea Blvd

City State Zip Code  
Oxford MI 48371-6729

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825033517245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

988.00

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

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

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

FOR LINE NUMBER: PAGE 85 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Susan M Crowley

Mailing Address 1214 Buckingham

City State Zip Code  
 Grosse Pointe Park MI 48230-1138

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825049717245

Amount of Each Receipt this Period

228.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.** Reba L Johnson

Mailing Address 27610 Goldengate Dr. W

City State Zip Code  
 Lathrup Village MI 48076-3457

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825059717245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C.** Peter G Albert

Mailing Address 30711 Delton

City State Zip Code  
 Madison Hts MI 48071-2109

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825063717245

Amount of Each Receipt this Period

234.00

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

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

839.00

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

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

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

FOR LINE NUMBER: PAGE 86 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael M Nolan  
Mailing Address 16055 Homestead Cir

City State Zip Code  
Northville MI 48168-3473

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825064717245

Amount of Each Receipt this Period

234.00

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

**B.** Full Name (Last, First, Middle Initial)  
Ronald L Beaudoin  
Mailing Address 534 Winwood Circle

City State Zip Code  
Walled Lake MI 48390-3576

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825067917245

Amount of Each Receipt this Period

234.00

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

**C.** Full Name (Last, First, Middle Initial)  
John H Becker  
Mailing Address 20129 Windham Dr

City State Zip Code  
Macomb MI 48044-3538

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825068117245

Amount of Each Receipt this Period

234.00

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

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

702.00

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

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

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

FOR LINE NUMBER: PAGE 87 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Ray A Warner  
Mailing Address 50707 Otter Creek

City State Zip Code  
Shelby Township MI 48317-1751

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825068317245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Walter E Adams  
Mailing Address 43840 Trillium Dr

City State Zip Code  
Sterling Heights MI 48314-1952

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825071317245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Patrick L O'Donnell  
Mailing Address 130 Barrington Pl

City State Zip Code  
Dearborn MI 48124-1145

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825072117245

Amount of Each Receipt this Period

234.00

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

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

988.00

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

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

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

FOR LINE NUMBER: PAGE 88 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael K Jennings II  
Mailing Address 23682 Paddock Dr

City State Zip Code  
Farmington Hills MI 48336-2226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825074917245

Amount of Each Receipt this Period

228.00

P/R Deduction (\$19.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Sharon J Rose  
Mailing Address 4372 Arbour Dr

City State Zip Code  
Commerce Township MI 48390-4102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825075217245

Amount of Each Receipt this Period

234.00

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

**C.** Full Name (Last, First, Middle Initial)  
Harry I Nowell III  
Mailing Address 598 Longfellow Dr

City State Zip Code  
Troy MI 48065-4815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825076717245

Amount of Each Receipt this Period

234.00

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

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

696.00

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



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

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

FOR LINE NUMBER: PAGE 89 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)

Dean H Swanson

Mailing Address 86 Webb St

City State Zip Code  
Troy MI 48098-4632

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825077917245

Amount of Each Receipt this Period

234.00

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

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

Bridget E Williams

Mailing Address 30480 Longcrest St

City State Zip Code  
Southfield MI 48076-1531

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825078017245

Amount of Each Receipt this Period

234.00

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

**C.** Full Name (Last, First, Middle Initial)

Daniel P Hackett

Mailing Address 16589 Grillo

City State Zip Code  
Clinton Township MI 48038-4010

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825079517245

Amount of Each Receipt this Period

234.00

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

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

702.00

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

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

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

FOR LINE NUMBER: PAGE 90 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Todd C Harrison

Mailing Address 5875 Gilbert Lake Rd.

City State Zip Code  
 Bloomfield Hills MI 48301-1914

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825084217245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.** Catherine M Sinning

Mailing Address 25232 Surrey Lane

City State Zip Code  
 Farmington Hills MI 48335-2041

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825084317245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C.** Debra A Trezil

Mailing Address 12405 Sunview Ct

City State Zip Code  
 South Lyon MI 48178-8166

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825084917245

Amount of Each Receipt this Period

234.00

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

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

988.00

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

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

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

FOR LINE NUMBER: PAGE 91 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)

Beverly Mathews

Mailing Address 281 Stephens

City State Zip Code  
 Grosse Pointe Farm MI 48236-3409

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825085517245

Amount of Each Receipt this Period

234.00

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

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

Tonja M Poole

Mailing Address 636 Watersedge Dr.

City State Zip Code  
 Ann Arbor MI 48105-2515

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825086517245

Amount of Each Receipt this Period

234.00

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

**C.** Full Name (Last, First, Middle Initial)

Roy E Nesler

Mailing Address PO Box 871159

City State Zip Code  
 Canton MI 48187-6159

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825089017245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

845.00

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

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

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

FOR LINE NUMBER: PAGE 92 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Claretha Kennedy

Mailing Address 19811 Santa Rosa

City State Zip Code  
 Detroit MI 48221-1770

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825091217245

Amount of Each Receipt this Period

234.00

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

**B.** Full Name (Last, First, Middle Initial)  
Karen E Anderson

Mailing Address 47610 Red Run Dr

City State Zip Code  
 Canton MI 48187-5490

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825091417245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Jacquelyn R Lee

Mailing Address 2952 Prince Hall Dr

City State Zip Code  
 Detroit MI 48207-5159

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825092317245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

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

858.00

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

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

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

FOR LINE NUMBER: PAGE 93 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Jacqueline M Dannis

Mailing Address 25111 W 13 Mile Rd

City State Zip Code  
 Franklin MI 48025-2307

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825093117245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

**B.** Kathleen A Popiela

Mailing Address 36365 Parklane Circle

City State Zip Code  
 Farmington Hills MI 48335-4210

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825093917245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C.** Luvone A Smith

Mailing Address 291 E Boston Blvd

City State Zip Code  
 Detroit MI 48202-1320

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825095817245

Amount of Each Receipt this Period

234.00

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

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

845.00

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

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

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

FOR LINE NUMBER: PAGE 94 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Alaadin M Abou-El-Seoud

Mailing Address 27410 Bridle Hills Dr

City

Farmington Hills

State

MI

Zip Code

48336-3006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation  
DIRECTOR

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825096617245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.** Janice L Crossland

Mailing Address 29194 Oak Point Dr.

City

Farmington Hills

State

MI

Zip Code

48331-2716

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation  
MANAGER

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825096717245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

**C.** Cathy Mozham

Mailing Address 20741 Country Oaks

City

Wyandotte

State

MI

Zip Code

48193-7958

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation  
DIRECTOR

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825098217245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

988.00

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

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

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

FOR LINE NUMBER: PAGE 95 / 199

(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 Michigan PAC

|  |  |  |  |
|--|--|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Lloyd L Banks<br>Mailing Address 2294 Traverse Dr<br>City Troy State MI Zip Code 48083-5949<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Blue Cross and Blue Shield of Michigan<br>Occupation MANAGER<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 234.00   |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR825098617245<br>Amount of Each Receipt this Period<br>234.00<br>P/R Deduction (\$18.00 Bi-Weekly) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Lisa M Hoomaian<br>Mailing Address 24429 Holyoke Ct<br>City Novi State MI Zip Code 48374-2853<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Blue Cross and Blue Shield of Michigan<br>Occupation MANAGER<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 234.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR825100717245<br>Amount of Each Receipt this Period<br>234.00<br>P/R Deduction (\$18.00 Bi-Weekly) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Lana M Tapani<br>Mailing Address 6035 Herbmoor<br>City Troy State MI Zip Code 48098-1827<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Blue Cross and Blue Shield of Michigan<br>Occupation MANAGER<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 234.00      |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR825101117245<br>Amount of Each Receipt this Period<br>234.00<br>P/R Deduction (\$18.00 Bi-Weekly) |

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

**702.00**

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

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

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

FOR LINE NUMBER: PAGE 96 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Elizabeth L Carter

Mailing Address 29645 Medbury

City State Zip Code  
Farmington Hills MI 48336-2128

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825101417245

Amount of Each Receipt this Period

234.00

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

**B.** Full Name (Last, First, Middle Initial)  
Ronda S Ralston

Mailing Address 718 West Dexter Trail

City State Zip Code  
Mason MI 48854-8606

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825104917245

Amount of Each Receipt this Period

234.00

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

**C.** Full Name (Last, First, Middle Initial)  
Brian G Smith

Mailing Address 315 University Dr

City State Zip Code  
East Lansing MI 48823-4132

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825105417245

Amount of Each Receipt this Period

234.00

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

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

702.00

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



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

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

FOR LINE NUMBER: PAGE 97 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Mark A Epolito  
Mailing Address 1426 Wilshire Drive

City State Zip Code  
Haslett MI 48840-8412

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR825106017245

Amount of Each Receipt this Period

234.00

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

**B.** Full Name (Last, First, Middle Initial)  
Donald J Whitford  
Mailing Address 20245 Sussex

City State Zip Code  
Macomb MI 48044-6514

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR825107017245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Francine E Pegues  
Mailing Address 959 Harcourt Rd.

City State Zip Code  
Grosse Pointe Park MI 48230-1875

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR825110517245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

988.00

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

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

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

FOR LINE NUMBER: PAGE 98 / 199

(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 Michigan PAC

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

David R Watroba

Mailing Address P.O. Box 601

City State Zip Code  
 Northville MI 48167-0601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825110817245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Barbara A Murphy

Mailing Address 3404 Park Forest Drive

City State Zip Code  
 West Bloomfield MI 48324-3233

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825111817245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Deirdre M Scott

Mailing Address 4876 Audubon

City State Zip Code  
 Detroit MI 48224-2755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
OTHER NON-EXEMPT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825113117245

Amount of Each Receipt this Period

234.00

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

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

988.00

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

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

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

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(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)

Sharon L Brock

Mailing Address 360 Holford St

City State Zip Code  
 River Rouge MI 48218-1152

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR825114217245

Amount of Each Receipt this Period

234.00

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

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

John M Gray

Mailing Address 10397 Cornerstone Drive

City State Zip Code  
 Washington MI 48095-2923

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR825115117245

Amount of Each Receipt this Period

232.00

P/R Deduction (\$29.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)

Pamela A Yanis

Mailing Address 905 Blairmoor Ct

City State Zip Code  
 Grosse Pointe Wood MI 48236-1244

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR825115217245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

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

713.00

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

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

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 100 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Christine Bramlitt

Mailing Address 24435 Surfside

City State Zip Code  
Novi MI 48374-3075

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825122117245

Amount of Each Receipt this Period

234.00

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

**B.** Full Name (Last, First, Middle Initial)  
Margaret T Anthony

Mailing Address 4451 Golfview Dr

City State Zip Code  
Brighton MI 48116-9186

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
OTHER NON-EXEMPT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825130217245

Amount of Each Receipt this Period

364.00

P/R Deduction (\$45.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Constance M Blachut

Mailing Address 787 Deer Court

City State Zip Code  
Plymouth MI 48170-1743

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825135617245

Amount of Each Receipt this Period

234.00

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

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

832.00

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

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

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

FOR LINE NUMBER: PAGE 101 / 199

(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 Michigan PAC

|  |  |  |  |
|--|--|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>H. Jay Meier<br>Mailing Address 19901 Devonshire Ln<br>City Macomb State MI Zip Code 48044-5769<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Blue Cross and Blue Shield of Michigan<br>Occupation MANAGER<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 234.00     |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR825139017245<br>Amount of Each Receipt this Period<br>234.00<br>P/R Deduction (\$18.00 Bi-Weekly) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Briana Chen<br>Mailing Address 37882 Amber Dr<br>City Farmington Hills State MI Zip Code 48331-1170<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Blue Cross and Blue Shield of Michigan<br>Occupation MANAGER<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 234.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR825139217245<br>Amount of Each Receipt this Period<br>234.00<br>P/R Deduction (\$18.00 Bi-Weekly) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Robert D Perry<br>Mailing Address 10025 Dorian Dr<br>City Plymouth State MI Zip Code 48170-3629<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Blue Cross and Blue Shield of Michigan<br>Occupation DIRECTOR<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 247.00    |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR825139317245<br>Amount of Each Receipt this Period<br>247.00<br>P/R Deduction (\$19.00 Bi-Weekly) |

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

715.00

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

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

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

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(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 Michigan PAC

Full Name (Last, First, Middle Initial)

A. Susan J Rubin

Mailing Address 41460 Belden Circle

City State Zip Code  
 Novi MI 48377-1546

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825140217245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. B. George Kuljurgis

Mailing Address 5587 Springwater Lane

City State Zip Code  
 West Bloomfield MI 48322-1749

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825143717245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

C. Joseph L Johnson

Mailing Address 2720 Winesap St Ne

City State Zip Code  
 Grand Rapids MI 49525-3900

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825151817245

Amount of Each Receipt this Period

234.00

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

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

845.00

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

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Jeffrey S Rubleski

Mailing Address 15293 Meadowwood Dr

City State Zip Code  
 Grand Haven MI 49417-9684

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825152217245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

**B.** Sophia C Quinn

Mailing Address 241 Tuscany Dr

City State Zip Code  
 Portage MI 49024-9109

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825154517245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

**C.** Jo A Sting

Mailing Address 1041 Brownell St Se

City State Zip Code  
 Kentwood MI 49508-7493

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825155617245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

845.00

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

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

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

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

**A.** Full Name (Last, First, Middle Initial)

Linda L Frost

Mailing Address 32675 Myrna

City State Zip Code  
 Livonia MI 48154-2911

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825157017245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Teresa L Bueche

Mailing Address 7144 Shalimar Dr NE

City State Zip Code  
 Comstock Park MI 49321-9644

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825161417245

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)

Sheryl F Lowe

Mailing Address 4899 Peggy St

City State Zip Code  
 West Bloomfield MI 48322-4446

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825162917245

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

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

1073.00

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



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

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

FOR LINE NUMBER: PAGE 105 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Susan L Barkell

Mailing Address 8171 Brookville Rd

City State Zip Code  
Plymouth MI 48170-5005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR825163217245

Amount of Each Receipt this Period

450.00

P/R Deduction (\$45.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.** Mary H Wisgerhof

Mailing Address 311 Grosse Pointe Blvd

City State Zip Code  
Grosse Pointe Farm MI 48236-3072

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR825166617245

Amount of Each Receipt this Period

228.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C.** S G Kipa

Mailing Address 4774 Avondale Terrance

City State Zip Code  
Blmfld Hls MI 48304-3602

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR825168417245

Amount of Each Receipt this Period

290.00

P/R Deduction (\$29.00 Bi-Weekly)

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

968.00

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

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

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

FOR LINE NUMBER: PAGE 106 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Calvin J. Maestro

Mailing Address 22535 Shadowglen Dr

City State Zip Code  
Farmington Hills MI 48335-3652

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825168517245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.** Juanita E Savage

Mailing Address 25646 Castlereigh Dr

City State Zip Code  
Farmington Hills MI 48336-1523

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825171717245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C.** George P Gopoian

Mailing Address 25437 Witherspoon

City State Zip Code  
Farmington Hills MI 48335-1368

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825172717245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

1001.00

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

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

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

FOR LINE NUMBER: PAGE 107 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Anjana J Patel

Mailing Address 2115 Kingsway Dr

City State Zip Code  
Troy MI 48098-4172

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR825172817245

Amount of Each Receipt this Period

209.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.** Asir U Ahmad

Mailing Address 1935 Hillwood Drive

City State Zip Code  
Bloomfield Hills MI 48304-2420

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR825173417245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C.** Michelle C Fullerton

Mailing Address 23528 Fordson

City State Zip Code  
Dearborn MI 48124-1602

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR825175617245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

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

703.00

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

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

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

FOR LINE NUMBER: PAGE 108 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Atheer A Kaddis

Mailing Address 36331 Fort Sumter Court

City State Zip Code  
 Farmington Hills MI 48331-3100

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825183017245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.** Gary W Dusute

Mailing Address 29762 Bayview

City State Zip Code  
 Grosse Ile MI 48138-1902

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825183917245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

**C.** Glen A Perry

Mailing Address 2148 Michele Dr

City State Zip Code  
 Troy MI 48085-3825

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825184217245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

988.00

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

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

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

FOR LINE NUMBER: PAGE 109 / 199

(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 Michigan PAC

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

Michael C Strampel

Mailing Address 13140 Addington Dr

City State Zip Code  
Dewitt MI 48820-8186

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825186117245

Amount of Each Receipt this Period

234.00

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

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

Patricia M Wilson

Mailing Address 597 Dresden Place

City State Zip Code  
St Clr Bch ON N8N 4-B6

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825186717245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Jeffrey A Holzhausen

Mailing Address 2675 Ambassador Dr

City State Zip Code  
Ypsilanti MI 48198-1028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825186917245

Amount of Each Receipt this Period

234.00

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

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

845.00

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

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

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

FOR LINE NUMBER: PAGE 110 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Thomas Maryon

Mailing Address 17852 Point Circle

City

Clinton Township

State

MI

Zip Code

48038-4828

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation  
DIRECTOR

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR825197417245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.** Kevin L Kihn

Mailing Address 10529 Stark

City

Livonia

State

MI

Zip Code

48150-2619

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation  
MANAGER

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR825202017245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

**C.** Suzette M Felling

Mailing Address 1966 Hunters Ridge

City

Bloomfield Hills

State

MI

Zip Code

48304-1036

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation  
MANAGER

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR825209817245

Amount of Each Receipt this Period

234.00

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

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

715.00

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

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

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

FOR LINE NUMBER: PAGE 111 / 199  
(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 Michigan PAC

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

Diane K Valade

Mailing Address 12927 LaSalle Ln

City State Zip Code  
Huntington Woods MI 48070-1045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825211417245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

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

Barbara A Menzies

Mailing Address 5320 Cedar Grove Ct

City State Zip Code  
West Bloomfield MI 48322-1574

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825212017245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Thomas J Ruane

Mailing Address 26509 Old Homestead Ct

City State Zip Code  
Farmington Hills MI 48331-3851

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825212817245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

1001.00

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

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

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

FOR LINE NUMBER: PAGE 112 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Susan P Bayless

Mailing Address 4722 Heather Ln

City State Zip Code  
 Bloomfield MI 48301-1410

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825213017245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.** Kerri L Larkin

Mailing Address 21882 Chase Dr

City State Zip Code  
 Novi MI 48375-4766

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825213617245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

**C.** Carrie S Bryant

Mailing Address 61 Adelaide

City State Zip Code  
 Detroit MI 48201-3110

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825260417245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

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

858.00

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



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 113 / 199

(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 Michigan PAC

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

Marcia N Persin

Mailing Address 5274 Pond Bluff Drive

City State Zip Code  
 West Bloomfield MI 48323-2442

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825261217245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Robert H Digby

Mailing Address 4125 Naubinway Rd

City State Zip Code  
 Okemos MI 48864-3424

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825268617245

Amount of Each Receipt this Period

260.00

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

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

Beth L Rubin

Mailing Address 4408 Westover Drive

City State Zip Code  
 W Bloomfield MI 48323-2874

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825270417245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

1014.00

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

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

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

FOR LINE NUMBER: PAGE 114 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)

Kevin L Seitz

Mailing Address 4342 Thoreson

City State Zip Code  
 Maple City MI 49664-8766

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825273017245

Amount of Each Receipt this Period

780.00

P/R Deduction (\$60.00 Bi-Weekly)

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

David W Kee

Mailing Address 5611 Huron Hills Dr

City State Zip Code  
 Commerce Twp MI 48382-4822

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825273317245

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)

Leslie A Viegas

Mailing Address 3100 Pine Lake Rd

City State Zip Code  
 Orchard Lake MI 48324-1949

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825273417245

Amount of Each Receipt this Period

780.00

P/R Deduction (\$60.00 Bi-Weekly)

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

2100.00

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

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

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

FOR LINE NUMBER: PAGE 115 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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 Michigan PAC

|   |  |  |  |
|---|--|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Lisa S DeMoss<br>Mailing Address 5025 Stonehenge Dr<br>City State Zip Code<br>Rochester MI 48306-2654<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer<br>Blue Cross and Blue Shield of Michigan<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Occupation<br>SVP<br>Aggregate Year-to-Date ▼<br>720.00       |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR825273617245<br>Amount of Each Receipt this Period<br>720.00<br>P/R Deduction (\$60.00 Bi-Weekly) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Kim E Sorget<br>Mailing Address 620 Hollywood Ave<br>City State Zip Code<br>Grosse Pointe Wood MI 48236-1319<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer<br>Blue Cross and Blue Shield of Michigan<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Occupation<br>VP<br>Aggregate Year-to-Date ▼<br>585.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR825273817245<br>Amount of Each Receipt this Period<br>585.00<br>P/R Deduction (\$45.00 Bi-Weekly) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Paul L. Marzec<br>Mailing Address 1058 Bloomview Circle<br>City State Zip Code<br>Rochester MI 48307-1728<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer<br>Blue Cross and Blue Shield of Michigan<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Occupation<br>VP<br>Aggregate Year-to-Date ▼<br>585.00    |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR825274017245<br>Amount of Each Receipt this Period<br>585.00<br>P/R Deduction (\$45.00 Bi-Weekly) |

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

**1890.00**

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

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

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

FOR LINE NUMBER: PAGE 116 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)

Kathryn L Elston

Mailing Address 2930 Dixie Hwy

City State Zip Code  
 Waterford MI 48328-1715

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825274117245

Amount of Each Receipt this Period

650.00

P/R Deduction (\$50.00 Bi-Weekly)

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

Jeanne H Carlson

Mailing Address 30847 Palmer Dr

City State Zip Code  
 Novi MI 48377-4520

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825274217245

Amount of Each Receipt this Period

780.00

P/R Deduction (\$60.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)

Michele A Samuels

Mailing Address 29203 Bradmoor Ct

City State Zip Code  
 Farmington Hills MI 48334-3270

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825274417245

Amount of Each Receipt this Period

780.00

P/R Deduction (\$60.00 Bi-Weekly)

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

2210.00

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

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

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

FOR LINE NUMBER: PAGE 117 / 199

(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 Michigan PAC

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

John P Austin

Mailing Address 2862 Foxfire

City State Zip Code  
 Milford MI 48380-4474

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825274517245

Amount of Each Receipt this Period

780.00

P/R Deduction (\$60.00 Bi-Weekly)

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

Mark R Bartlett

Mailing Address 48662 Central Park Dr

City State Zip Code  
 Canton MI 48188-1493

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825274617245

Amount of Each Receipt this Period

780.00

P/R Deduction (\$60.00 Bi-Weekly)

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

Robert W Kasperek

Mailing Address 34796 Bretton

City State Zip Code  
 Livonia MI 48152-4047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825274817245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

2145.00

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

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

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

FOR LINE NUMBER: PAGE 118 / 199

(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 Michigan PAC

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

Dale A Robertson

Mailing Address 3370 Brookpoint Dr, SE

City State Zip Code  
 Grand Rapids MI 49546-7284

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825275117245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

Michelle L Gaggini

Mailing Address 18515 Country Club Ct.

City State Zip Code  
 Riverview MI 48193-8161

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825275517245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

William P Smith

Mailing Address 1754 Rapids Way

City State Zip Code  
 Rochester Hills MI 48309-3217

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825275617245

Amount of Each Receipt this Period

780.00

P/R Deduction (\$60.00 Bi-Weekly)

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

1950.00

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

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

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

FOR LINE NUMBER: PAGE 119 / 199

(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 Michigan PAC

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

Janice L Cantelon

Mailing Address 20503 Clement

City State Zip Code  
 Northville MI 48167-1356

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825275817245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

Ira Strumwasser

Mailing Address 5076 Scio Church Rd

City State Zip Code  
 Ann Arbor MI 48103-9636

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825276017245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

John G Fitzpatrick

Mailing Address 44491 Wright Way

City State Zip Code  
 Novi MI 48375-1549

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825276317245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

1755.00

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

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

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

FOR LINE NUMBER: PAGE 120 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

A. Thomas L Simmer

Mailing Address 4975 S Ridgeside Circle

City State Zip Code  
 Ann Arbor MI 48105-9447

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825276517245

Amount of Each Receipt this Period

780.00

P/R Deduction (\$60.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Daniel J Loepp

Mailing Address 1720 Washington Blvd

City State Zip Code  
 Birmingham MI 48009-1918

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825276617245

Amount of Each Receipt this Period

780.00

P/R Deduction (\$60.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Anne M Regling

Mailing Address 4929 Deepwood Dr

City State Zip Code  
 Troy MI 48098-4199

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825276717245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

2145.00

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



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

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

FOR LINE NUMBER: PAGE 121 / 199

(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 Michigan PAC

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

Greg T Vartanoff

Mailing Address 22359 Woodstock Ct

City State Zip Code  
 Woodhaven MI 48183-3116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825276817245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Laura S Marble

Mailing Address 1880 Golf Ridge Dr S

City State Zip Code  
 Bloomfield Townshi MI 48302-1737

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825276917245

Amount of Each Receipt this Period

780.00

P/R Deduction (\$60.00 Bi-Weekly)

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

Joseph J Andraska

Mailing Address 2220 Tilsby Ct

City State Zip Code  
 Ann Arbor MI 48103-6160

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825381817245

Amount of Each Receipt this Period

234.00

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

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

1391.00

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

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

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

FOR LINE NUMBER: PAGE 122 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Wanda P Bowman

Mailing Address 40616 Kingsley Ln

City State Zip Code  
 Novi MI 48377-1633

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825383917245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.** Jeanette Johnson

Mailing Address 29726 Somerset

City State Zip Code  
 Southfield MI 48076-1871

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825386917245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

**C.** Kathleen E Young

Mailing Address 1217 Naples Court

City State Zip Code  
 Ann Arbor MI 48103-5314

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825400317245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

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

728.00

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

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

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

FOR LINE NUMBER: PAGE 123 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Pamela S Reinert  
Mailing Address 661 Plantation Drive

City State Zip Code  
Saginaw MI 48638-7162

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825402017245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Robert M Goodman  
Mailing Address 21751 Chase Dr

City State Zip Code  
Novi MI 48375-4767

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825418417245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
William C Granger  
Mailing Address 7201 Cuesta Way Drive

City State Zip Code  
Rockford MI 49341-9495

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825418817245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

871.00

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

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

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

FOR LINE NUMBER: PAGE 124 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
Dr. Hashim M Yar  
Mailing Address 572 Tally Ho Court

City State Zip Code  
Bloomfield Hills MI 48304-1847

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825418917245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
James E Grzegorzczuk  
Mailing Address 4400 James Dr

City State Zip Code  
Midland MI 48642-3781

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825419417245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Janet A Jennings  
Mailing Address 8120 E. Jefferson  
#7d

City State Zip Code  
Detroit MI 48214-2665

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825421117245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

1001.00

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

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

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

FOR LINE NUMBER: PAGE 125 / 199

(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 Michigan PAC

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

Mary V Driessche

Mailing Address 6026 Meadowlark

City State Zip Code  
 Rockford MI 49341-9221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825422817245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

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

Carla M Chambers

Mailing Address 3159 Woodsboro Dr. Ne

City State Zip Code  
 Grand Rapids MI 49525-3056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825426417245

Amount of Each Receipt this Period

261.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Leslie A James

Mailing Address 528 Woodhaven Dr

City State Zip Code  
 Commerce Township MI 48390-5805

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825428017245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

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

755.00

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

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

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

FOR LINE NUMBER: PAGE 126 / 199

(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 Michigan PAC

|   |       |                                    |  |  |
|---|-------|------------------------------------|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Dana R Taylor  |       |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>Transaction ID: PR825431917245 |  |
| Mailing Address 19785 W 12 Mile Rd<br>Apt 354   |       |                                    | Amount of Each Receipt this Period<br>234.00                               |  |
| City  | State | Zip Code                           |  |  |
| Southfield  | MI    | 48076-2510                         |  |  |
| FEC ID number of contributing federal political committee.<br>C   |       |                                    |  |  |
| Name of Employer<br>Blue Cross and Blue Shield of Michigan  |       | Occupation<br>MANAGER              |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |       | Aggregate Year-to-Date ▼<br>234.00 | P/R Deduction (\$18.00 Bi-Weekly)  |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Nancy L Dewan  |       |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>Transaction ID: PR825435217245 |  |
| Mailing Address 6336 Thurber Rd   |       |                                    | Amount of Each Receipt this Period<br>247.00                               |  |
| City  | State | Zip Code                           |  |  |
| Bloomfield Hills  | MI    | 48301-1525                         |  |  |
| FEC ID number of contributing federal political committee.<br>C   |       |                                    |  |  |
| Name of Employer<br>Blue Cross and Blue Shield of Michigan  |       | Occupation<br>DIRECTOR             |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |       | Aggregate Year-to-Date ▼<br>247.00 | P/R Deduction (\$19.00 Bi-Weekly)  |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Robert T Hopper  |       |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>Transaction ID: PR825435517245 |  |
| Mailing Address 40671 La Grange Drive   |       |                                    | Amount of Each Receipt this Period<br>377.00                               |  |
| City  | State | Zip Code                           |  |  |
| Sterling Heights  | MI    | 48313-4340                         |  |  |
| FEC ID number of contributing federal political committee.<br>C   |       |                                    |  |  |
| Name of Employer<br>Blue Cross and Blue Shield of Michigan  |       | Occupation<br>DIRECTOR             |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |       | Aggregate Year-to-Date ▼<br>377.00 | P/R Deduction (\$29.00 Bi-Weekly)  |  |

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

858.00

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

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

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

FOR LINE NUMBER: PAGE 127 / 199

(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** William L Toples

Mailing Address 7679 Watford Dr

City

West Bloomfield

State

MI

Zip Code

48322-2837

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation  
DIRECTOR

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825439417245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.** David H Cook

Mailing Address 2946 Birch Hollow Drive  
Apt 2B

City

Ann Arbor

State

MI

Zip Code

48108-2321

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation  
MANAGER

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825439917245

Amount of Each Receipt this Period

234.00

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

Full Name (Last, First, Middle Initial)

**C.** Gaye A Butler

Mailing Address 30225 Helmandale Dr

City

Franklin

State

MI

Zip Code

48025-1527

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation  
MANAGER

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825440317245

Amount of Each Receipt this Period

234.00

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

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

715.00

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

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

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

FOR LINE NUMBER: PAGE 128 / 199

(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 Michigan PAC

|   |  |  |  |
|---|--|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Lisa M Hardy<br>Mailing Address 1705 Brian Ct<br>City Ann Arbor State MI Zip Code 48104-4267<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Blue Cross and Blue Shield of Michigan<br>Occupation DIRECTOR<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 247.00      |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR825441617245<br>Amount of Each Receipt this Period<br>247.00<br>P/R Deduction (\$19.00 Bi-Weekly) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Catherine A Murphy<br>Mailing Address 1911 Bacon Ave<br>City Berkley State MI Zip Code 48072-1063<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Blue Cross and Blue Shield of Michigan<br>Occupation DIRECTOR<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 261.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR825443517245<br>Amount of Each Receipt this Period<br>261.00<br>P/R Deduction (\$29.00 Bi-Weekly) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Elizabeth A Geis<br>Mailing Address 1392 Ludean<br>City Highland State MI Zip Code 48356-1168<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Blue Cross and Blue Shield of Michigan<br>Occupation DIRECTOR<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 377.00     |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>Transaction ID:</b> PR825443617245<br>Amount of Each Receipt this Period<br>377.00<br>P/R Deduction (\$29.00 Bi-Weekly) |

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

885.00

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



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

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

FOR LINE NUMBER: PAGE 129 / 199

(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 Michigan PAC

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

Diane L Bridgeman

Mailing Address 687 Chestnut Dr

City State Zip Code  
 Wixom MI 48393-4304

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of MichiganOccupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825443717245

Amount of Each Receipt this Period

234.00

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

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

Philip D Briskin

Mailing Address 523 Wilcox St

City State Zip Code  
 Rochester MI 48307-1443

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of MichiganOccupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825449817245

Amount of Each Receipt this Period

377.00

P/R Deduction (\$29.00 Bi-Weekly)

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

Joan M Morehead

Mailing Address 4240 Sebring Ln

City State Zip Code  
 White Lake MI 48383-1381

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of MichiganOccupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825464117245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

1196.00

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

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

Use separate schedule(s)  
or each category of the  
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(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 Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Sandra D Boozer

Mailing Address 4562 Apple Tree Court

City

West Bloomfield

State

MI

Zip Code

48323-3910

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation

VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825464217245

Amount of Each Receipt this Period

405.00

P/R Deduction (\$45.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.** Gail Ross

Mailing Address 322 E Harrison Ave  
Unit 26

City

Royal Oak

State

MI

Zip Code

48067-3284

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation

VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825464317245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C.** Elana S Kozik

Mailing Address 13109 Vernon

City

Huntington Woods

State

MI

Zip Code

48070-1451

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation

VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825464417245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

1575.00

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

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

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

FOR LINE NUMBER: PAGE 131 / 199

(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 Michigan PAC

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

Susan A Kluge

Mailing Address 10795 Stoney Point Dr

City State Zip Code  
 South Lyon MI 48178-9820

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825464617245

Amount of Each Receipt this Period

780.00

P/R Deduction (\$60.00 Bi-Weekly)

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

Kevin J Klobucar

Mailing Address 7299 Talonna Trl

City State Zip Code  
 Fowlerville MI 48836-8263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825464717245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

Alison D Pollard

Mailing Address 170 Orchard St

City State Zip Code  
 Chelsea MI 48118-1052

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825464817245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

1950.00

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

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

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

FOR LINE NUMBER: PAGE 132 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)

Carl E Siebers

Mailing Address 232 Quail Ridge

City State Zip Code  
 Ada MI 49301-8778

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR825464917245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

Douglas R Woll

Mailing Address 3311 Woodview Lake Rd

City State Zip Code  
 West Bloomfield MI 48323-3573

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR825465017245

Amount of Each Receipt this Period

780.00

P/R Deduction (\$60.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)

Patricia L Turner

Mailing Address 3420 Heirloom Rose Place

City State Zip Code  
 Oviedo FL 32766-6607

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR825465217245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

1950.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

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(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 Michigan PAC

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

David R Nelson

Mailing Address 23928 Devonshire Dr

City State Zip Code  
 Novi MI 48374-3758

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825465317245

Amount of Each Receipt this Period

780.00

P/R Deduction (\$60.00 Bi-Weekly)

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

Marc D Keshishian

Mailing Address 30498 Fox Club Dr

City State Zip Code  
 Farmington Hills MI 48331-1956

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR825465517245

Amount of Each Receipt this Period

585.00

P/R Deduction (\$45.00 Bi-Weekly)

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

Kathleen M Garman

Mailing Address 1627 Devonwood

City State Zip Code  
 Rochester Hills MI 48306-3107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR905714717245

Amount of Each Receipt this Period

247.00

P/R Deduction (\$19.00 Bi-Weekly)

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

1612.00

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

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

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

FOR LINE NUMBER: PAGE 134 / 199

(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 Michigan PAC

**A.** Full Name (Last, First, Middle Initial)  
David B Keener

Mailing Address 823 W Oakridge

City State Zip Code  
Ferndale MI 48220-2753

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y

Transaction ID: PR931671117245

Amount of Each Receipt this Period

234.00

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

**B.** Full Name (Last, First, Middle Initial)  
Daniel N Martin

Mailing Address 1447 W Hazelhurst St

City State Zip Code  
Ferndale MI 48220-3121

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross and Blue Shield  
of Michigan

Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y

Transaction ID: PR931671917245

Amount of Each Receipt this Period

261.00

P/R Deduction (\$29.00 Bi-Weekly)

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

495.00

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

133268.00

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

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

FOR LINE NUMBER: PAGE 135 / 199

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

**A.** Full Name (Last, First, Middle Initial)

Bill Hardiman for State Senate

Mailing Address P.O. Box 1669

City State Zip Code  
 Grand Rapids MI 49501

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☐ General  
☒ Other (specify) ▼  
 2006 General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 0 1 / 2 0 0 7

Transaction ID: 26313475

Amount of Each Receipt this Period

1000.00

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

Michigan House Democratic Fund

Mailing Address P.O. Box 16193

City State Zip Code  
 Lansing MI 48909

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 1 / 2 0 0 7

Transaction ID: 26313477

Amount of Each Receipt this Period

3500.00

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

4500.00

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

4500.00

# **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 136 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Friends Of Senator Carl Levin

Mailing Address P.O. Box 92089

City  
Warren

State  
MI

Zip Code  
48092

Purpose of Disbursement

011

Category/  
Type

Candidate Name  
Sen. Carl Levin

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 1

Transaction ID: 26313488

Date of Disbursement

01 / 25 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B.** Friends Of Senator Carl Levin

Mailing Address P.O. Box 92089

City  
Warren

State  
MI

Zip Code  
48092

Purpose of Disbursement

011

Category/  
Type

Candidate Name  
Sen. Carl Levin

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 1

Transaction ID: 26313489

Date of Disbursement

01 / 25 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C.** John D Dingell For Congress Committee

Mailing Address 607 Fourteenth Street Nw

City  
Washington

State  
DC

Zip Code  
20005

Purpose of Disbursement

011

Category/  
Type

Candidate Name  
Rep. John Dingell

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 16

Transaction ID: 26288776

Date of Disbursement

02 / 01 / 2007

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

12500.00

**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 137 / 199

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. America's Leadership PAC**

Mailing Address 607 14th Street NW  
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 26204146

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

011

Category/  
Type

Full Name (Last, First, Middle Initial)

## **B. Stupak for Congress**

Mailing Address 817 9th Ave

City Menominee State MI Zip Code 49858

Purpose of Disbursement

Candidate Name  
Bart Stupak

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MI District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 26288820

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

011

Category/  
Type

Full Name (Last, First, Middle Initial)

## **C. Levin For Congress Committee**

Mailing Address P.O. Box 1092

City Warren State MI Zip Code 48092

Purpose of Disbursement

Candidate Name  
Rep. Sander Levin

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MI District: 12

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: 26288785

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

011

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional) .....

7500.00

**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 138 / 199

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Mccotter Congressional Committee

Mailing Address P. O. Box 530788

City  
Livonia

State  
MI

Zip Code  
48153

Purpose of Disbursement

011

Category/  
Type

Candidate Name  
Rep. Thaddeus McCotter

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 11

Transaction ID: 26288790

Date of Disbursement

03 / 23 / 2007

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** National Republican Congressional Committee

Mailing Address 320 First St. SE

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 26288799

Date of Disbursement

03 / 28 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C.** Walberg For Congress

Mailing Address 6769 Teachout Road

City  
Tipton

State  
MI

Zip Code  
49287

Purpose of Disbursement

011

Category/  
Type

Candidate Name  
Mr. Timothy Walberg

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 7

Transaction ID: 26288833

Date of Disbursement

03 / 28 / 2007

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6500.00

**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)

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|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Mike R Fund

Mailing Address P.O. box 65796

City  
Washington

State  
DC

Zip Code  
20035

Purpose of Disbursement

Candidate Name

**011**  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 26288796**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B.** Michigan Republican Party - Fedral Acct.

Mailing Address 520 Seymour St.

City  
Lansing

State  
MI

Zip Code  
48933

Purpose of Disbursement

Candidate Name

**011**  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 26313545**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C.** Friends Of Max Baucus 2002

Mailing Address PO Box 586

City  
Helena

State  
MT

Zip Code  
59624

Purpose of Disbursement

Candidate Name  
Sen. Max Baucus

**011**  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MT District: 1

**Transaction ID: 26288746**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

8500.00

**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  
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(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Stupak for Congress

Mailing Address 817 9th Ave

City  
Menominee

State  
MI

Zip Code  
49858

Purpose of Disbursement

011

Category/  
Type

Candidate Name  
Bart Stupak

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District:

Transaction ID: 26288821

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** Stupak for Congress

Mailing Address 817 9th Ave

City  
Menominee

State  
MI

Zip Code  
49858

Purpose of Disbursement

011

Category/  
Type

Candidate Name  
Bart Stupak

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District:

Transaction ID: 26288822

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C.** Republican Member Senate Fund

Mailing Address 8801 Lehman

City  
Montague

State  
MI

Zip Code  
49437

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 26313562

Date of Disbursement

06 / 06 / 2007

Amount of Each Disbursement this Period

2500.00

**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)

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|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Upton For All Of Us

Mailing Address PO Box 490

City  
St Joseph

State  
MI

Zip Code  
49085

Purpose of Disbursement

011

Category/  
Type

Candidate Name  
Rep. Fred Upton

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 6

Transaction ID: 26288830

Date of Disbursement

06 / 20 / 2007

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B.** Kilpatrick For United States Congress

Mailing Address PO Box 32175

City  
Detroit

State  
MI

Zip Code  
48232

Purpose of Disbursement

011

Category/  
Type

Candidate Name  
Rep. Carolyn Kilpatrick

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 15

Transaction ID: 26313498

Date of Disbursement

06 / 22 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C.** Candice Miller for Congress

Mailing Address P.O. Box 791

City  
Mt. Clemens

State  
MI

Zip Code  
48046

Purpose of Disbursement

011

Category/  
Type

Candidate Name  
Candice Miller

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District:

Transaction ID: 26204203

Date of Disbursement

06 / 26 / 2007

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

8000.00

**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)

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|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Peter Hoekstra For Congress

Mailing Address 1454 Cimarron Drive

City  
Holland

State  
MI

Zip Code  
49423

Purpose of Disbursement

Candidate Name  
Rep. Peter Hoekstra

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MI

District: 2

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: 26288768

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 7 |   | 2 | 0 | 0 | 7 |

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1000.00

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

47500.00

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Senate Republican Campaign Committee**

Mailing Address 208 Walnut

City  
Lansing

State  
MI

Zip Code  
48933

Purpose of Disbursement

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 26288818**

Date of Disbursement

01 / 17 / 2007

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. Bishop Majority Fund**

Mailing Address 883 Great Oaks Blvd.

City  
Rochester

State  
MI

Zip Code  
48307

Purpose of Disbursement

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 26204161**

Date of Disbursement

01 / 24 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. Ted Hammon for State Representative**

Mailing Address 3240 Eastgate

City  
Burton

State  
MI

Zip Code  
48519

Purpose of Disbursement  
Ted Hammon, STATE HOUSE MI

Candidate Name  
Ted Hammon

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District:

**Transaction ID: 26288825**

Date of Disbursement

01 / 31 / 2007

Amount of Each Disbursement this Period

500.00

Ted Hammon, STATE HOUSE  
MI

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Patty Birkholz for State Senate

Mailing Address P.O. Box 316

City  
Allegan

State  
MI

Zip Code  
49010

Purpose of Disbursement  
Patty Birkholz, STATE SENATE MI

Candidate Name  
Patty Birkholz

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 24

Transaction ID: 26288802

Date of Disbursement

02 / 01 / 2007

Amount of Each Disbursement this Period

1000.00

Patty Birkholz, STATE SEN-  
ATE MI

Full Name (Last, First, Middle Initial)

**B.** Phillip J. LaJoy for State Representative

Mailing Address 1256 Crowndale Ln.

City  
Canton

State  
MI

Zip Code  
48188

Purpose of Disbursement  
Phillip LaJoy, STATE HOUSE 21st MI

Candidate Name  
Phillip J. LaJoy

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 21

Transaction ID: 26288805

Date of Disbursement

02 / 04 / 2007

Amount of Each Disbursement this Period

500.00

Phillip LaJoy, STATE HOUSE  
21st MI

Full Name (Last, First, Middle Initial)

**C.** Friends of Kevin Elsenheimer

Mailing Address P.O. Box 114

City  
Bellaire

State  
MI

Zip Code  
49615

Purpose of Disbursement  
Kevin Elsenheimer, STATE HOUSE 105th MI

Candidate Name  
Kevin Elsenheimer

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 10

Transaction ID: 26288742

Date of Disbursement

02 / 06 / 2007

Amount of Each Disbursement this Period

500.00

Kevin Elsenheimer, STATE  
HOUSE 105th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Friends of Paul Wojno

Mailing Address 27314 Larose

City  
Warren

State  
MI

Zip Code  
48093

Purpose of Disbursement  
Paul Wojno, County Clerk MI

Candidate Name  
Paul Wojno

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District:

Transaction ID: 26313563

Date of Disbursement

02 / 06 / 2007

Amount of Each Disbursement this Period

500.00

Paul Wojno, County Clerk  
MI

Full Name (Last, First, Middle Initial)

**B.** Citizens for Glenn S. Anderson

Mailing Address 34300 Park Grove Dr.

City  
Westland

State  
MI

Zip Code  
48185

Purpose of Disbursement  
Glenn Anderson, STATE HOUSE 18th MI

Candidate Name  
Representative Glenn Anderson

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 18

Transaction ID: 26288760

Date of Disbursement

02 / 07 / 2007

Amount of Each Disbursement this Period

1000.00

Glenn Anderson, STATE HOU-  
SE 18th MI

Full Name (Last, First, Middle Initial)

**C.** Citizens for Glenn S. Anderson

Mailing Address 34300 Park Grove Dr.

City  
Westland

State  
MI

Zip Code  
48185

Purpose of Disbursement  
Glenn Anderson, STATE HOUSE 18th MI

Candidate Name  
Representative Glenn Anderson

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 18

Transaction ID: 26288762

Date of Disbursement

02 / 07 / 2007

Amount of Each Disbursement this Period

1000.00

Glenn Anderson, STATE HOU-  
SE 18th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

2500.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Citizens to Elect Bruce Patterson - Senate**

Mailing Address 42479 Redfern

City Canton State MI Zip Code 48187

Purpose of Disbursement  
Bruce Patterson, STATE SENATE MI

Candidate Name  
Bruce Patterson

011  
Category/  
Type

Office Sought: ☐ House ☒ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 7

Transaction ID: 26232168

Date of Disbursement

02 / 08 / 2007

Amount of Each Disbursement this Period

500.00

Bruce Patterson, STATE SE-  
NATE MI

Full Name (Last, First, Middle Initial)

## **B. Committee to Elect Cameron Brown State Senator**

Mailing Address 29057 e. Lafayette

City Sturgis State MI Zip Code 49091

Purpose of Disbursement  
Cameron Brown, STATE SENATE MI

Candidate Name  
Cameron Brown

011  
Category/  
Type

Office Sought: ☐ House ☒ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 20

Transaction ID: 26204201

Date of Disbursement

02 / 13 / 2007

Amount of Each Disbursement this Period

500.00

Cameron Brown, STATE SENA-  
TE MI

Full Name (Last, First, Middle Initial)

## **C. Team to Elect Richard Ball**

Mailing Address 5370 Garrison Rd.

City Laingsburg State MI Zip Code 48848

Purpose of Disbursement  
Richard Ball, STATE HOUSE 85th MI

Candidate Name  
MI Rep. Richard Ball

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 85

Transaction ID: 26288824

Date of Disbursement

02 / 13 / 2007

Amount of Each Disbursement this Period

500.00

Richard Ball, STATE HOUSE  
85th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1500.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

|   |   |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|---|---|---|----------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>bluePAC  |   | <b>Transaction ID:</b> 26204162<br><b>Date of Disbursement</b><br><table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> | M        | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 |  | 1 | 4 |  | 2 | 0 | 0 | 7 |
| M   | M   | /   | D        | D | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 0   | 2   |   | 1        | 4 |   | 2 | 0 | 0 | 7 |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 1310 G. Street, N.W.  |   | <b>Amount of Each Disbursement this Period</b><br><table border="1"> <tr> <td>10000.00</td> </tr> </table>  | 10000.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 10000.00  |   |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| City Washington State DC Zip Code 20005   | <b>011</b><br>Category/<br>Type   |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement   |   |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name  |   |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:                  | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                 |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Committee to Elect Dave Hildenbrand  |   | <b>Transaction ID:</b> 26232511<br><b>Date of Disbursement</b><br><table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> | M        | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 |  | 1 | 4 |  | 2 | 0 | 0 | 7 |
| M   | M   | /   | D        | D | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 0   | 2   |   | 1        | 4 |   | 2 | 0 | 0 | 7 |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 2700 Timpson Ave. SE  |   | <b>Amount of Each Disbursement this Period</b><br><table border="1"> <tr> <td>500.00</td> </tr> </table>  | 500.00   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 500.00  |   |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| City Lowell State MI Zip Code 49331   | <b>011</b><br>Category/<br>Type   |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Dave Hildenbrand, STATE HOUSE 86th MI  |   |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name<br>Dave Hildenbrand  |   |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: MI District: 86 | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Dave Hildenbrand, STATE<br>HOUSE 86th MI  |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Friends of Roger Kahn  |   | <b>Transaction ID:</b> 26288751<br><b>Date of Disbursement</b><br><table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> | M        | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 |  | 1 | 4 |  | 2 | 0 | 0 | 7 |
| M   | M   | /   | D        | D | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 0   | 2   |   | 1        | 4 |   | 2 | 0 | 0 | 7 |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address P.O. Box 1627   |   | <b>Amount of Each Disbursement this Period</b><br><table border="1"> <tr> <td>1000.00</td> </tr> </table>   | 1000.00  |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 1000.00   |   |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| City Saginaw State MI Zip Code 49605  | <b>011</b><br>Category/<br>Type   |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Roger Kahn, STATE HOUSE 94th MI  |   |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name<br>Roger Kahn  |   |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: MI District: 94 | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Roger Kahn, STATE HOUSE<br>94th MI  |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

**SUBTOTAL** of Disbursements This Page (optional) .....

11500.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. People for Gino Polidori**

Mailing Address P.O. Box 2339

City Dearborn State MI Zip Code 48123

Purpose of Disbursement  
Gino Polidori, STATE HOUSE 15th MI

Candidate Name  
Gino Polidori

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 15

Transaction ID: 26288804

Date of Disbursement

02 / 14 / 2007

Amount of Each Disbursement this Period

500.00

Gino Polidori, STATE HOUSE  
15th MI

Full Name (Last, First, Middle Initial)

## **B. Paul Opsommer for State Representative**

Mailing Address 315 E. Main St.

City Dewitt State MI Zip Code 48820

Purpose of Disbursement  
Paul Opsommer, STATE HOUSE 93rd MI

Candidate Name  
Paul Opsommer

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 93

Transaction ID: 26288803

Date of Disbursement

02 / 15 / 2007

Amount of Each Disbursement this Period

500.00

Paul Opsommer, STATE HOUSE  
93rd MI

Full Name (Last, First, Middle Initial)

## **C. Friends of Morris Hood, III**

Mailing Address 8872 Cloverlawn

City Detroit State MI Zip Code 48204

Purpose of Disbursement  
Morris Hood, STATE HOUSE 11th MI

Candidate Name  
Morris Hood, III

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 11

Transaction ID: 26288748

Date of Disbursement

02 / 20 / 2007

Amount of Each Disbursement this Period

500.00

Morris Hood, STATE HOUSE  
11th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1500.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Committee to Elect Goeff Hansen**

Mailing Address P.O. Box 167

City  
Hart

State  
MI

Zip Code  
49420

Purpose of Disbursement

Goef Hansen, STATE HOUSE 100th MI

Candidate Name  
Goef Hansen

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 10

Transaction ID: 26288366

Date of Disbursement

02 / 20 / 2007

Amount of Each Disbursement this Period

500.00

Goef Hansen, STATE HOUSE  
100th MI

Full Name (Last, First, Middle Initial)

## **B. Kuipers for Senate**

Mailing Address 364 W. 31st St.

City  
Holland

State  
MI

Zip Code  
49423

Purpose of Disbursement

Wayne Kuipers, STATE SENATE MI

Candidate Name  
MI Sen. Wayne Kuipers

011

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 30

Transaction ID: 26288782

Date of Disbursement

02 / 20 / 2007

Amount of Each Disbursement this Period

1000.00

Wayne Kuipers, STATE SENA-  
TE MI

Full Name (Last, First, Middle Initial)

## **C. David Agema for State Representative**

Mailing Address P.O. Box 855

City  
Jenison

State  
MI

Zip Code  
49429

Purpose of Disbursement

David Agema, STATE HOUSE 74th MI

Candidate Name  
David Agema

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 74

Transaction ID: 26288719

Date of Disbursement

02 / 21 / 2007

Amount of Each Disbursement this Period

500.00

David Agema, STATE HOUSE  
74th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Arlan B. Meekhof for State Representative

Mailing Address 9128 Oak Creek Ln.

City State Zip Code  
West Olive MI 49460

Purpose of Disbursement  
Arlan Meekhof, STATE HOUSE 89th MI

Candidate Name  
Arlan Meekhof

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 89

Transaction ID: 26288832

Date of Disbursement

02 / 22 / 2007

Amount of Each Disbursement this Period

500.00

Arlan Meekhof, STATE HOUSE 89th MI

Full Name (Last, First, Middle Initial)

**B.** Steve Tobocman 2002

Mailing Address P.O. Box 9746

City State Zip Code  
Detroit MI 48209

Purpose of Disbursement  
Steve Tobocman, STATE HOUSE 12th MI

Candidate Name  
Steve Tobocman

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 12

Transaction ID: 26288754

Date of Disbursement

02 / 27 / 2007

Amount of Each Disbursement this Period

1000.00

Steve Tobocman, STATE HOUSE 12th MI

Full Name (Last, First, Middle Initial)

**C.** Randy Richardville for Senate

Mailing Address P.O. Box 1631

City State Zip Code  
Monroe MI 48161

Purpose of Disbursement  
Randy Richardville, STATE SENATE MI

Candidate Name  
Randy Richardville

011  
Category/  
Type

Office Sought: ☐ House ☒ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 17

Transaction ID: 26288811

Date of Disbursement

02 / 27 / 2007

Amount of Each Disbursement this Period

1000.00

Randy Richardville, STATE SENATE MI

**SUBTOTAL** of Disbursements This Page (optional) .....

2500.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Friends to elect Bert Johnson**

Mailing Address 36 Eason St.

City Highland Pk. State MI Zip Code 48203

Purpose of Disbursement  
Bert Johnson, STATE HOUSE 5th MI

Candidate Name  
Bert Johnson

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 5

Transaction ID: 26288755

Date of Disbursement

02 / 27 / 2007

Amount of Each Disbursement this Period

500.00

Bert Johnson, STATE HOUSE  
5th MI

Full Name (Last, First, Middle Initial)

## **B. Friends of Mary Valentine**

Mailing Address P.O. Box 421

City Muskegon State MI Zip Code 49441

Purpose of Disbursement  
Mary Valentine, STATE HOUSE 91st MI

Candidate Name  
MI Rep. Mary Valentine

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 91

Transaction ID: 26313490

Date of Disbursement

02 / 27 / 2007

Amount of Each Disbursement this Period

500.00

Mary Valentine, STATE HOUSE  
91st MI

Full Name (Last, First, Middle Initial)

## **C. Friends of Matt Gillard**

Mailing Address P.O. Box 284

City Alpena State MI Zip Code 49707

Purpose of Disbursement  
Matthew Gillard, STATE HOUSE 106th MI

Candidate Name  
MI Rep. Matthew Gillard

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 10

Transaction ID: 26288745

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

500.00

Matthew Gillard, STATE HOUSE  
106th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1500.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Bill Hardiman for State Senate

Mailing Address P.O. Box 1669

City  
Grand Rapids

State  
MI

Zip Code  
49501

Purpose of Disbursement  
Bill Hardiman, STATE SENATE MI

Candidate Name  
MI Sen. Bill Hardiman

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 29

Transaction ID: 26204154

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

1000.00

Bill Hardiman, STATE SENA-  
TE MI

Full Name (Last, First, Middle Initial)

**B.** Marty Knollenberg for State Representative

Mailing Address 198 E. Big Beaver Rd.

City  
Troy

State  
MI

Zip Code  
48083

Purpose of Disbursement  
Martin Knollenberg, STATE HOUSE 41st MI

Candidate Name  
Martin Knollenberg

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 41

Transaction ID: 26288789

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

300.00

Martin Knollenberg, STATE  
HOUSE 41st MI

Full Name (Last, First, Middle Initial)

**C.** Stamas for State Senate

Mailing Address P.O. Box 153

City  
Midland

State  
MI

Zip Code  
48640

Purpose of Disbursement  
Tony Stamas, STATE SENATE MI

Candidate Name  
Representative Tony Stamas

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 36

Transaction ID: 26288828

Date of Disbursement

03 / 01 / 2007

Amount of Each Disbursement this Period

1000.00

Tony Stamas, STATE SENATE  
MI

**SUBTOTAL** of Disbursements This Page (optional) .....

2300.00

**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 153 / 199

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Hansen Clarke for Senate

Mailing Address 243 Congress  
Suite350

City State Zip Code  
Detroit MI 48226

Purpose of Disbursement  
Hansen Clarke, STATE HOUSE 07th MI

Candidate Name  
Representative Hansen Clarke

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President  
Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 7

Transaction ID: 26288767

Date of Disbursement

03 / 01 / 2007

Amount of Each Disbursement this Period

1000.00

Hansen Clarke, STATE HOUSE  
07th MI

Full Name (Last, First, Middle Initial)

**B.** Marc Corriveau for State Representative

Mailing Address P.O. Box 5251

City State Zip Code  
Northville MI 48167

Purpose of Disbursement  
Marc Corriveau, STATE HOUSE 20th MI

Candidate Name  
MI Rep. Marc Corriveau

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President  
Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 20

Transaction ID: 26313499

Date of Disbursement

03 / 01 / 2007

Amount of Each Disbursement this Period

500.00

Marc Corriveau, STATE HOU-  
SE 20th MI

Full Name (Last, First, Middle Initial)

**C.** Committee to elect Brenda Clack

Mailing Address 3120 Helber St.

City State Zip Code  
Flint MI 48504

Purpose of Disbursement  
Brenda Clack, STATE HOUSE 34th MI

Candidate Name  
Brenda Clack

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President  
Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 34

Transaction ID: 26232505

Date of Disbursement

03 / 06 / 2007

Amount of Each Disbursement this Period

600.00

Brenda Clack, STATE HOUSE  
34th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

2100.00

**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 154 / 199

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Friends of Ken Horn

Mailing Address 516 S. Main

City Frankenmuth State MI Zip Code 48734

Purpose of Disbursement  
Ken Horn, STATE HOUSE 94th MI

Candidate Name  
Ken Horn

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 94

Transaction ID: 26288741

Date of Disbursement

03 / 06 / 2007

Amount of Each Disbursement this Period

300.00

Ken Horn, STATE HOUSE 94th MI

Full Name (Last, First, Middle Initial)

**B.** Valde Garcia for State Senate

Mailing Address P.O. Box 136

City St. Johns State MI Zip Code 48879

Purpose of Disbursement  
Valde Garcia, STATE SENATE MI

Candidate Name  
MI Sen. Valde Garcia

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 26

Transaction ID: 26288831

Date of Disbursement

03 / 07 / 2007

Amount of Each Disbursement this Period

500.00

Valde Garcia, STATE SENATE MI

Full Name (Last, First, Middle Initial)

**C.** Friends of Jason Allen

Mailing Address 415 Munson

City Traverse City State MI Zip Code 49686

Purpose of Disbursement  
Jason Allen, STATE SENATE MI

Candidate Name  
Representative Jason Allen

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 36

Transaction ID: 26288735

Date of Disbursement

03 / 07 / 2007

Amount of Each Disbursement this Period

1000.00

Jason Allen, STATE SENATE MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1800.00

**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 155 / 199

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** House Republican Campaign Committee

Mailing Address P.O. Box 15035

City  
Lansing

State  
MI

Zip Code  
48901

Purpose of Disbursement

Candidate Name

**011**  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 26288769**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Bill Huizenga for State Representative

Mailing Address P.O. box 254

City  
Zeeland

State  
MI

Zip Code  
49464

Purpose of Disbursement

Bill Huizenga, STATE HOUSE 90th MI

Candidate Name  
Bill Huizenga

**011**  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 90

**Transaction ID: 26204156**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Bill Huizenga, STATE HOUSE  
90th MI

Full Name (Last, First, Middle Initial)

**C.** Coleman A. Young for Detroit

Mailing Address 3430 E. Jefferson

City  
Detroit

State  
MI

Zip Code  
48207

Purpose of Disbursement

Coleman Young, STATE HOUSE 4th MI

Candidate Name  
Coleman Young

**011**  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 4

**Transaction ID: 26232209**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Coleman Young, STATE HOUSE  
4th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Martin Griffin for State Representative

Mailing Address 705 S. Grinnell

City  
Jackson

State  
MI

Zip Code  
49203

Purpose of Disbursement  
Martin Griffin, STATE HOUSE 64th MI

Candidate Name  
MI Rep. Martin Griffin

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 64

Transaction ID: 26313500

Date of Disbursement

03 / 07 / 2007

Amount of Each Disbursement this Period

500.00

Martin Griffin, STATE HOUSE 64th MI

Full Name (Last, First, Middle Initial)

**B.** Gilbert for State Senate

Mailing Address 9882 N. River Rd.

City  
Algonac

State  
MI

Zip Code  
48001

Purpose of Disbursement  
Jud Gilbert, STATE HOUSE 82nd MI

Candidate Name  
Representative Jud Gilbert

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 82

Transaction ID: 26288778

Date of Disbursement

03 / 08 / 2007

Amount of Each Disbursement this Period

1000.00

Jud Gilbert, STATE HOUSE 82nd MI

Full Name (Last, First, Middle Initial)

**C.** Pam Byrnes for State Representative

Mailing Address 17381 N. M-52

City  
Chelsea

State  
MI

Zip Code  
48118

Purpose of Disbursement  
Pamela Byrnes, STATE HOUSE 52nd MI

Candidate Name  
MI Rep. Pamela Byrnes

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 52

Transaction ID: 26288800

Date of Disbursement

03 / 08 / 2007

Amount of Each Disbursement this Period

500.00

Pamela Byrnes, STATE HOUSE 52nd MI

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Friends of Mike Prusi**

Mailing Address 27 N. Basin Dr.

City Negunee State MI Zip Code 49866

Purpose of Disbursement  
Michael Prusi, STATE SENATE MI

Candidate Name  
Michael Prusi

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 38

Transaction ID: 26288747

Date of Disbursement

03 / 13 / 2007

Amount of Each Disbursement this Period

1000.00

Michael Prusi, STATE SENA-  
TE MI

Full Name (Last, First, Middle Initial)

## **B. Citizens Supporting Mike Nofs**

Mailing Address P.O. Box 219

City Battle Creek State MI Zip Code 49016

Purpose of Disbursement  
Mike Nofs, STATE HOUSE 67th MI

Candidate Name  
Mike Nofs

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 67

Transaction ID: 26232161

Date of Disbursement

03 / 13 / 2007

Amount of Each Disbursement this Period

500.00

Mike Nofs, STATE HOUSE 67-  
th MI

Full Name (Last, First, Middle Initial)

## **C. Barb Byrum for State Representative**

Mailing Address P.O. Box 27344

City Lansing State MI Zip Code 48909

Purpose of Disbursement  
Barb Byrum, STATE HOUSE 67th MI

Candidate Name  
Barb Byrum

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 67

Transaction ID: 26204148

Date of Disbursement

03 / 13 / 2007

Amount of Each Disbursement this Period

500.00

Barb Byrum, STATE HOUSE  
67th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

**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 158 / 199

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Committee to Elect Michael Switalski State Senator**

Mailing Address 31412 Gay

City  
Roseville

State  
MI

Zip Code  
48066

Purpose of Disbursement  
Michael Switalski, STATE SENATE MI

Candidate Name  
Michael Switalski

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 10

Transaction ID: 26288793

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

1000.00

Michael Switalski, STATE  
SENATE MI

Full Name (Last, First, Middle Initial)

## **B. Lee Gonzales Team**

Mailing Address 2460 Murphy

City  
Flint

State  
MI

Zip Code  
48504

Purpose of Disbursement  
Lee Gonzales, STATE HOUSE 49th MI

Candidate Name  
Lee Gonzales

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 49

Transaction ID: 26288784

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

500.00

Lee Gonzales, STATE HOUSE  
49th MI

Full Name (Last, First, Middle Initial)

## **C. Dudley Spade for State Representative**

Mailing Address P.O. Box 157

City  
Tipton

State  
MI

Zip Code  
49287

Purpose of Disbursement  
Dudley Spade, STATE HOUSE 57th MI

Candidate Name  
Dudley Spade

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 57

Transaction ID: 26288723

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

400.00

Dudley Spade, STATE HOUSE  
57th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1900.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 159 / 199

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Citizens for John J. Gleason**

Mailing Address 2617 Macomber

City  
FlintState  
MIZip Code  
48503

Purpose of Disbursement

John Gleason, STATE SENATE MI

Candidate Name

John Gleason

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

2008

☐ Primary☒ General☐ Other (specify) ▼

State: MI

District: 27

Transaction ID: 26232156

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 1 | 4 | / | 2 | 0 | 0 | 7 |

Amount of Each Disbursement this Period

1000.00

John Gleason, STATE SENATE  
MI

Full Name (Last, First, Middle Initial)

**B. Friends of Andy Coulouris**

Mailing Address P.O. Box 2005

City  
SaginawState  
MIZip Code  
48605

Purpose of Disbursement

Andrew Coulouris, STATE HOUSE 95th MI

Candidate Name

Andrew Coulouris

Office Sought:

☒ House☐ Senate☐ President

Disbursement For:

2008

☐ Primary☒ General☐ Other (specify) ▼

State: MI

District: 95

Transaction ID: 26288726

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 1 | 4 | / | 2 | 0 | 0 | 7 |

Amount of Each Disbursement this Period

500.00

Andrew Coulouris, STATE  
HOUSE 95th MI

Full Name (Last, First, Middle Initial)

**C. Friends of John Moolenaar**

Mailing Address P.O. Box 2244

City  
MidlandState  
MIZip Code  
48641

Purpose of Disbursement

John Moolenaar, STATE HOUSE 98th MI

Candidate Name

John Moolenaar

Office Sought:

☒ House☐ Senate☐ President

Disbursement For:

2008

☐ Primary☒ General☐ Other (specify) ▼

State: MI

District: 98

Transaction ID: 26288738

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 1 | 5 | / | 2 | 0 | 0 | 7 |

Amount of Each Disbursement this Period

500.00

John Moolenaar, STATE HOU-  
SE 98th MI

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

2000.00

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 160 / 199

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Capitol National Bank**

Mailing Address 200 Washington Sq.

City  
Lansing

State  
MI

Zip Code  
48933

Purpose of Disbursement

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 26204204

Date of Disbursement

03 / 15 / 2007

Amount of Each Disbursement this Period

2303.00

Full Name (Last, First, Middle Initial)

## **B. Rick Jones for State Representative 2004**

Mailing Address P.O. Box 115

City  
Grand Ledge

State  
MI

Zip Code  
48837

Purpose of Disbursement

Rick Jones, STATE HOUSE 71st MI

Candidate Name  
Rick Jones

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 71

Transaction ID: 26288705

Date of Disbursement

03 / 15 / 2007

Amount of Each Disbursement this Period

300.00

Rick Jones, STATE HOUSE  
71st MI

Full Name (Last, First, Middle Initial)

## **C. Kevin Green for State House**

Mailing Address 4754 Karel Jean Ct. SW

City  
Wyoming

State  
MI

Zip Code  
49509

Purpose of Disbursement

Kevin Green, STATE HOUSE 77th MI

Candidate Name  
Kevin Green

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 77

Transaction ID: 26288780

Date of Disbursement

03 / 15 / 2007

Amount of Each Disbursement this Period

500.00

Kevin Green, STATE HOUSE  
77th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

3103.00

**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 161 / 199

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Cox 5200 Club

Mailing Address P.O. Box 531 630

City Livonia State MI Zip Code 48153

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 26288716

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

011

Category/  
Type

Full Name (Last, First, Middle Initial)

**B.** Senate Democratic Fund

Mailing Address P.O. box 111

City Lansing State MI Zip Code 48909

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 26288817

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10000.00

011

Category/  
Type

Full Name (Last, First, Middle Initial)

**C.** Committee to Elect Tory Rocca

Mailing Address 37139 Camelot Dr. #271

City Sterling Heights State MI Zip Code 48312

Purpose of Disbursement  
Tory Rocca, STATE HOUSE 30th MI

Candidate Name  
Tory Rocca

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MI District: 30

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: 26288711

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

011

Category/  
Type

Tory Rocca, STATE HOUSE  
30th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

11300.00

**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 162 / 199

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Committee to Elect Darwin Booher**

Mailing Address P.O. Box 971

City  
Ewart

State  
MI

Zip Code  
49631

Purpose of Disbursement

Darwin Booher, STATE HOUSE 102nd MI

Candidate Name  
Darwin Booher

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 10

Transaction ID: 26232510

Date of Disbursement

03 / 20 / 2007

Amount of Each Disbursement this Period

300.00

Darwin Booher, STATE HOUSE  
102nd MI

Full Name (Last, First, Middle Initial)

## **B. Friends of Tom Pearce**

Mailing Address 5530 Sunfish Lake Ave.

City  
Rockford

State  
MI

Zip Code  
49341

Purpose of Disbursement

tom Pearce, STATE HOUSE 73rd MI

Candidate Name  
tom Pearce

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 73

Transaction ID: 26288757

Date of Disbursement

03 / 20 / 2007

Amount of Each Disbursement this Period

300.00

tom Pearce, STATE HOUSE  
73rd MI

Full Name (Last, First, Middle Initial)

## **C. Deb Cherry Committee**

Mailing Address 2124 S. Belsay Rd.

City  
Burton

State  
MI

Zip Code  
48519

Purpose of Disbursement

Deb Cherry, STATE SENATE MI

Candidate Name  
Deb Cherry

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 26

Transaction ID: 26288722

Date of Disbursement

03 / 21 / 2007

Amount of Each Disbursement this Period

1000.00

Deb Cherry, STATE SENATE  
MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1600.00

**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 163 / 199

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Ray Basham for Senate

Mailing Address 12406 Telegraph Rd.

City State Zip Code  
Taylor MI 48180

Purpose of Disbursement  
Raymond Basham, STATE SENATE MI

Candidate Name  
Raymond Basham

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President  
Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 8

Transaction ID: 26288808

Date of Disbursement

03 / 21 / 2007

Amount of Each Disbursement this Period

1000.00

Raymond Basham, STATE SEN-  
ATE MI

Full Name (Last, First, Middle Initial)

**B.** Team to Elect Richard Ball

Mailing Address 5370 Garrison Rd.

City State Zip Code  
Laingsburg MI 48848

Purpose of Disbursement  
Richard Ball, STATE HOUSE 85th MI

Candidate Name  
MI Rep. Richard Ball

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President  
Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 85

Transaction ID: 26288702

Date of Disbursement

03 / 21 / 2007

Amount of Each Disbursement this Period

500.00

Richard Ball, STATE HOUSE  
85th MI

Full Name (Last, First, Middle Initial)

**C.** Whitmer for Senate

Mailing Address P.O. Box 11063

City State Zip Code  
Lansing MI 48912

Purpose of Disbursement  
Gretchen Whitmer, STATE SENATE MI

Candidate Name  
MI Sen. Gretchen Whitmer

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President  
Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 23

Transaction ID: 26288370

Date of Disbursement

03 / 21 / 2007

Amount of Each Disbursement this Period

1000.00

Gretchen Whitmer, STATE  
SENATE MI

**SUBTOTAL** of Disbursements This Page (optional) .....

2500.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Friends of Robert Dean

Mailing Address P.O. Box 6861

City  
Grand Rapids

State  
MI

Zip Code  
49516

Purpose of Disbursement  
Robert Dean, STATE HOUSE 75th MI

Candidate Name  
MI Rep. Robert Dean

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 75

Transaction ID: 26313491

Date of Disbursement

03 / 21 / 2007

Amount of Each Disbursement this Period

500.00

Robert Dean, STATE HOUSE  
75th MI

Full Name (Last, First, Middle Initial)

**B.** John Pappageorge for Senate

Mailing Address 201 Townsend St.

City  
Lansing

State  
MI

Zip Code  
48933

Purpose of Disbursement  
John Pappageorge, STATE SENATE MI

Candidate Name  
MI Sen. John Pappageorge

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 13

Transaction ID: 26313493

Date of Disbursement

03 / 21 / 2007

Amount of Each Disbursement this Period

1000.00

John Pappageorge, STATE  
SENATE MI

Full Name (Last, First, Middle Initial)

**C.** Bruce Caswell for State Representative

Mailing Address 8940 E. Bacon Rd.

City  
Hillsdale

State  
MI

Zip Code  
49242

Purpose of Disbursement  
Bruce Caswell, STATE HOUSE 58th MI

Candidate Name  
Bruce Caswell

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 58

Transaction ID: 26204196

Date of Disbursement

03 / 22 / 2007

Amount of Each Disbursement this Period

300.00

Bruce Caswell, STATE HOUSE  
58th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1800.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Diamond PAC**

Mailing Address 3430 E. Jefferson #303

City Detroit State MI Zip Code 48207

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 26313485

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

011

Category/  
Type

Full Name (Last, First, Middle Initial)

## **B. Senate Republican Campaign Committee**

Mailing Address 208 Walnut

City Lansing State MI Zip Code 48933

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 26288819

Date of Disbursement

/   /

Amount of Each Disbursement this Period

19500.00

011

Category/  
Type

Full Name (Last, First, Middle Initial)

## **C. Committee to Elect Virgil K. Smith**

Mailing Address 19450 Gloucester

City Detroit State MI Zip Code 48203

Purpose of Disbursement  
Virgil Smith, STATE HOUSE 7th MI

Candidate Name  
Virgil K. Smith

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MI District: 7

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: 26288714

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

011

Category/  
Type

Virgil Smith, STATE HOUSE  
7th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

21300.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Craig DeRoche for State Representative

Mailing Address 1620 W. Lake Dr.

City State Zip Code  
Novi MI 48377

Purpose of Disbursement  
Craig DeRoche, STATE HOUSE 38th MI

Candidate Name  
Craig DeRoche

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MI District: 38

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: 26288717

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Craig DeRoche, STATE HOUSE  
38th MI

Full Name (Last, First, Middle Initial)

**B.** Chris Ward Majority Fund

Mailing Address P.O. Box 31

City State Zip Code  
Brighton MI 48116

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 26204531

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Friends of Fred Miller

Mailing Address P.O. Box 46274

City State Zip Code  
Mt Clemens MI 48046

Purpose of Disbursement  
Fred Miller, STATE HOUSE 31st MI

Candidate Name  
Fred Miller

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MI District: 31

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: 26288732

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Fred Miller, STATE HOUSE  
31st MI

**SUBTOTAL** of Disbursements This Page (optional) .....

2500.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Elect Bettie C. Scott

Mailing Address 17160 Gravier

City  
Detroit

State  
MI

Zip Code  
48224

Purpose of Disbursement

Bettie Scott, STATE HOUSE 3rd MI

Candidate Name  
Bettie Scott

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 3

Transaction ID: 26288728

Date of Disbursement

03 / 27 / 2007

Amount of Each Disbursement this Period

500.00

Bettie Scott, STATE HOUSE  
3rd MI

Full Name (Last, First, Middle Initial)

**B.** Friends of Richard Hammel

Mailing Address 6343 W. Clovis

City  
Flushing

State  
MI

Zip Code  
48433

Purpose of Disbursement

Richard Hammel, STATE HOUSE 48th MI

Candidate Name  
Richard Hammel

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 48

Transaction ID: 26288750

Date of Disbursement

03 / 27 / 2007

Amount of Each Disbursement this Period

500.00

Richard Hammel, STATE HOU-  
SE 48th MI

Full Name (Last, First, Middle Initial)

**C.** Committee to Elect Mark C. Jansen

Mailing Address 6857 Linden SE

City  
Grand Rapids

State  
MI

Zip Code  
48548

Purpose of Disbursement

Mark Jansen, STATE HOUSE 72nd MI

Candidate Name  
Representative Mark Jansen

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 72

Transaction ID: 26288788

Date of Disbursement

03 / 28 / 2007

Amount of Each Disbursement this Period

1000.00

Mark Jansen, STATE HOUSE  
72nd MI

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Friends of Gabe Leland**

Mailing Address 10025 Ashton

City  
Detroit

State  
MI

Zip Code  
48228

Purpose of Disbursement  
Gabe Leland, STATE HOUSE 10th MI

Candidate Name  
Gabe Leland

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 10

Transaction ID: 26288733

Date of Disbursement

03 / 28 / 2007

Amount of Each Disbursement this Period

500.00

Gabe Leland, STATE HOUSE  
10th MI

Full Name (Last, First, Middle Initial)

## **B. Citizens to Elect Tonya Schuitmaker**

Mailing Address P.O. Box 362

City  
Paw Paw

State  
MI

Zip Code  
49079

Purpose of Disbursement  
Tonya Schuitmaker, STATE HOUSE 80th MI

Candidate Name  
Tonya Schuitmaker

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 80

Transaction ID: 26232179

Date of Disbursement

03 / 28 / 2007

Amount of Each Disbursement this Period

500.00

Tonya Schuitmaker, STATE  
HOUSE 80th MI

Full Name (Last, First, Middle Initial)

## **C. Committee to Elect Marie Donigan**

Mailing Address 612 Dorchester

City  
Royal Oak

State  
MI

Zip Code  
48067

Purpose of Disbursement  
Marie Donigan, STATE HOUSE 26th MI

Candidate Name  
MI Rep. Marie Donigan

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 26

Transaction ID: 26288682

Date of Disbursement

03 / 28 / 2007

Amount of Each Disbursement this Period

500.00

Marie Donigan, STATE HOUSE  
26th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1500.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Committee to Elect Tim Melton**

Mailing Address 1604 Sterling

City  
Pontiac

State  
MI

Zip Code  
48340

Purpose of Disbursement

Tim Melton, STATE HOUSE 29th MI

Candidate Name  
Tim Melton

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 29

Transaction ID: 26288678

Date of Disbursement

03 / 28 / 2007

Amount of Each Disbursement this Period

300.00

Tim Melton, STATE HOUSE  
29th MI

Full Name (Last, First, Middle Initial)

## **B. Committee to Elect Lamar Lemmons, Jr.**

Mailing Address 11024 Whittier

City  
Detroit

State  
MI

Zip Code  
48213

Purpose of Disbursement

Lamar Lemmons, STATE HOUSE 2nd MI

Candidate Name  
Lamar Lemmons

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 2

Transaction ID: 26288680

Date of Disbursement

03 / 28 / 2007

Amount of Each Disbursement this Period

500.00

Lamar Lemmons, STATE HOUSE  
2nd MI

Full Name (Last, First, Middle Initial)

## **C. Friends of David Palsrok**

Mailing Address 16 Oxford Ct.

City  
Manistee

State  
MI

Zip Code  
49660

Purpose of Disbursement

David Palsrok, STATE HOUSE 101st MI

Candidate Name  
David Palsrok

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 10

Transaction ID: 26288729

Date of Disbursement

03 / 29 / 2007

Amount of Each Disbursement this Period

500.00

David Palsrok, STATE HOUSE  
101st MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1300.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Committee to Elect David Law**

Mailing Address 6766 Glenway Dr.

City West Bloomfield State MI Zip Code 48322

Purpose of Disbursement  
David Law, STATE HOUSE 39th MI

Candidate Name  
David Law

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 39

Transaction ID: 26288336

Date of Disbursement

03 / 29 / 2007

Amount of Each Disbursement this Period

500.00

David Law, STATE HOUSE 39th MI

Full Name (Last, First, Middle Initial)

## **B. Committee to Elect Tim Moore**

Mailing Address P.O. Box 865

City Farwell State MI Zip Code 48622

Purpose of Disbursement  
Tim Moore, STATE HOUSE 97th MI

Candidate Name  
MI Rep. Tim Moore

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 97

Transaction ID: 26288709

Date of Disbursement

03 / 29 / 2007

Amount of Each Disbursement this Period

500.00

Tim Moore, STATE HOUSE 97th MI

Full Name (Last, First, Middle Initial)

## **C. Diamond PAC**

Mailing Address 3430 E. Jefferson #303

City Detroit State MI Zip Code 48207

Purpose of Disbursement

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 26313486

Date of Disbursement

03 / 29 / 2007

Amount of Each Disbursement this Period

1700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2700.00

**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  
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FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Republican Victory Committee**

Mailing Address P.O. Box 2114

City  
Traverse City

State  
MI

Zip Code  
49685

Purpose of Disbursement

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 26288810

Date of Disbursement

04 / 11 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. Majority Matters**

Mailing Address P.O. Box 12116

City  
Lansing

State  
MI

Zip Code  
48901-2116

Purpose of Disbursement

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 26288787

Date of Disbursement

04 / 11 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. Michigan House Democratic Fund**

Mailing Address P.O. Box 16193

City  
Lansing

State  
MI

Zip Code  
48909

Purpose of Disbursement

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 26288794

Date of Disbursement

04 / 17 / 2007

Amount of Each Disbursement this Period

13500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

15500.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Paul Condino for State Representative

Mailing Address 21170 Winchester

City  
Southfield

State  
MI

Zip Code  
48076

Purpose of Disbursement  
Paul Condino, STATE HOUSE 35th MI

Candidate Name  
Paul Condino

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 35

Transaction ID: 26288749

Date of Disbursement

04 / 17 / 2007

Amount of Each Disbursement this Period

500.00

Paul Condino, STATE HOUSE  
35th MI

Full Name (Last, First, Middle Initial)

**B.** Mark Meadows for State Representative

Mailing Address P.O. Box 4041

City  
East Lansing

State  
MI

Zip Code  
48826

Purpose of Disbursement  
Mark Meadows, STATE HOUSE 69th MI

Candidate Name  
Mark Meadows

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 69

Transaction ID: 26288791

Date of Disbursement

04 / 17 / 2007

Amount of Each Disbursement this Period

500.00

Mark Meadows, STATE HOUSE  
69th MI

Full Name (Last, First, Middle Initial)

**C.** Mark Meadows for State Representative

Mailing Address P.O. Box 4041

City  
East Lansing

State  
MI

Zip Code  
48826

Purpose of Disbursement  
Mark Meadows, STATE HOUSE 69th MI

Candidate Name  
Mark Meadows

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 69

Transaction ID: 26288792

Date of Disbursement

04 / 17 / 2007

Amount of Each Disbursement this Period

500.00

Mark Meadows, STATE HOUSE  
69th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1500.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Committee to Elect Marsha Cheeks**

Mailing Address P.O. box 06572

City  
Detroit

State  
MI

Zip Code  
48206

Purpose of Disbursement  
Marsha Cheeks, STATE HOUSE 6th MI

Candidate Name  
Marsha Cheeks

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 6

Transaction ID: 26288699

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

500.00

Marsha Cheeks, STATE HOUSE  
6th MI

Full Name (Last, First, Middle Initial)

## **B. Committee to Elect Kathleen Law**

Mailing Address 29866 Lowell

City  
Gibraltar

State  
MI

Zip Code  
48173

Purpose of Disbursement  
Kathleen Law, STATE HOUSE 23rd MI

Candidate Name  
MI Rep. Kathleen Law

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 23

Transaction ID: 26288673

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

500.00

Kathleen Law, STATE HOUSE  
23rd MI

Full Name (Last, First, Middle Initial)

## **C. John Proos for State Representative**

Mailing Address 2695 Hillview Ln.

City  
St. Joseph

State  
MI

Zip Code  
49085

Purpose of Disbursement  
John Proos, STATE HOUSE 79th MI

Candidate Name  
John Proos

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 79

Transaction ID: 26288777

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

300.00

John Proos, STATE HOUSE  
79th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1300.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Committee to Elect Kathy Angerer**

Mailing Address P.O. Box 157

City Dundee State MI Zip Code 48131

Purpose of Disbursement  
Kathy Angerer, STATE HOUSE 55th MI

Candidate Name  
MI Rep. Kathy Angerer

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MI District: 55

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: 26288675

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

1000.00

Kathy Angerer, STATE HOUSE  
55th MI

## **B. Committee to Elect Mike Lahti**

Mailing Address 400 Elevation St.

City Hancock State MI Zip Code 49330

Purpose of Disbursement  
Mike Lahti, STATE HOUSE 110th MI

Candidate Name  
Mike Lahti

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MI District: 11

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: 26288700

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

500.00

Mike Lahti, STATE HOUSE  
110th MI

## **C. Committee to Elect Irma Clark to Senate**

Mailing Address 2688 Oakman Blvd.

City Detroit State MI Zip Code 48238

Purpose of Disbursement  
Irma Clark, STATE SENATE MI

Candidate Name  
Representative Irma Clark

Office Sought: ☐ House  
☒ Senate  
☐ President

State: MI District: 3

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: 26288397

Date of Disbursement

04 / 19 / 2007

Amount of Each Disbursement this Period

1000.00

Irma Clark, STATE SENATE  
MI

**SUBTOTAL** of Disbursements This Page (optional) .....

2500.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Nancy Cassis for State Senate

Mailing Address 43700 Expo Center Dr.

City State Zip Code  
Novi MI 48375

Purpose of Disbursement  
Nancy Cassis, STATE SENATE MI

Candidate Name  
Representative Nancy Cassis

011  
Category/  
Type

Office Sought: ☐ House ☒ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 15

Transaction ID: 26288797

Date of Disbursement

04 / 19 / 2007

Amount of Each Disbursement this Period

1000.00

Nancy Cassis, STATE SENATE  
MI

Full Name (Last, First, Middle Initial)

**B.** Committee to Elect Tim Melton

Mailing Address 1604 Sterling

City State Zip Code  
Pontiac MI 48340

Purpose of Disbursement  
Tim Melton, STATE HOUSE 29th MI

Candidate Name  
Tim Melton

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 29

Transaction ID: 26288708

Date of Disbursement

04 / 19 / 2007

Amount of Each Disbursement this Period

500.00

Tim Melton, STATE HOUSE  
29th MI

Full Name (Last, First, Middle Initial)

**C.** House Republican Campaign Committee

Mailing Address P.O. Box 15035

City State Zip Code  
Lansing MI 48901

Purpose of Disbursement

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State: District:

Transaction ID: 26288770

Date of Disbursement

04 / 20 / 2007

Amount of Each Disbursement this Period

10000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

11500.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Gilda Jacobs for Senate

Mailing Address 8353 Hendrie Blvd.

City Huntington Woods State MI Zip Code 48070

Purpose of Disbursement  
Gilda Jacobs, STATE SENATE MI

Candidate Name  
Gilda Jacobs

011  
Category/  
Type

Office Sought: ☐ House ☒ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 14

Transaction ID: 26288759

Date of Disbursement

04 / 24 / 2007

Amount of Each Disbursement this Period

1000.00

Gilda Jacobs, STATE SENATE MI

Full Name (Last, First, Middle Initial)

**B.** Bill Caul for State Representative

Mailing Address P.O. Box 384

City Mt. Pleasant State MI Zip Code 48804

Purpose of Disbursement  
Bill Caul, STATE HOUSE 99th MI

Candidate Name  
Bill Caul

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 99

Transaction ID: 26204153

Date of Disbursement

04 / 24 / 2007

Amount of Each Disbursement this Period

300.00

Bill Caul, STATE HOUSE 99th MI

Full Name (Last, First, Middle Initial)

**C.** Kate Ebli for State Representative

Mailing Address P.O. Box 2141

City Monroe State MI Zip Code 48162

Purpose of Disbursement  
Kate Ebli, STATE HOUSE 56th MI

Candidate Name  
MI Rep. Kate Ebli

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 56

Transaction ID: 26313497

Date of Disbursement

04 / 24 / 2007

Amount of Each Disbursement this Period

500.00

Kate Ebli, STATE HOUSE 56th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1800.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Citizens to Elect Bruce Patterson - Senate**

Mailing Address 42479 Redfern

City Canton State MI Zip Code 48187

Purpose of Disbursement  
Bruce Patterson, STATE SENATE MI

Candidate Name  
Bruce Patterson

011  
Category/  
Type

Office Sought: ☐ House ☒ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 7

Transaction ID: 26232174

Date of Disbursement

04 / 25 / 2007

Amount of Each Disbursement this Period

2000.00

Bruce Patterson, STATE SE-  
NATE MI

Full Name (Last, First, Middle Initial)

## **B. Barbara Farrah for State Representative**

Mailing Address 15442 Kennebec

City Southgate State MI Zip Code 48195

Purpose of Disbursement  
Barbara Farrah, STATE HOUSE 13th MI

Candidate Name  
Barbara Farrah

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 13

Transaction ID: 26204151

Date of Disbursement

04 / 25 / 2007

Amount of Each Disbursement this Period

1000.00

Barbara Farrah, STATE HOU-  
SE 13th MI

Full Name (Last, First, Middle Initial)

## **C. Committee to Elect Neal Nitz**

Mailing Address 7939 Stevensville-Baroda Rd.

City Baroda State MI Zip Code 49101

Purpose of Disbursement  
Neal Nitz, STATE HOUSE 78th MI

Candidate Name  
Neal Nitz

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 78

Transaction ID: 26288701

Date of Disbursement

04 / 25 / 2007

Amount of Each Disbursement this Period

300.00

Neal Nitz, STATE HOUSE 78-  
th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

3300.00

**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)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Tupac Hunter for State Senate

Mailing Address 24461 Pembroke Ave.

City State Zip Code  
 Detroit MI 48219

Purpose of Disbursement  
 Tupac Hunter, STATE SENATE MI

Candidate Name  
 Tupac Hunter

011  
 Category/  
 Type

Office Sought: ☐ House ☒ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 5

Transaction ID: 26288829

Date of Disbursement

04 / 25 / 2007

Amount of Each Disbursement this Period

1000.00

Tupac Hunter, STATE SENATE  
 MI

Full Name (Last, First, Middle Initial)

**B.** Friends of Robert Dean

Mailing Address P.O. Box 6861

City State Zip Code  
 Grand Rapids MI 49516

Purpose of Disbursement  
 Robert Dean, STATE HOUSE 75th MI

Candidate Name  
 MI Rep. Robert Dean

011  
 Category/  
 Type

Office Sought: ☒ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 75

Transaction ID: 26313492

Date of Disbursement

04 / 25 / 2007

Amount of Each Disbursement this Period

400.00

Robert Dean, STATE HOUSE  
 75th MI

Full Name (Last, First, Middle Initial)

**C.** Committee to Elect John Espinoza

Mailing Address 121 Wells St.

City State Zip Code  
 Crosswell MI 48422

Purpose of Disbursement  
 John Espinoza, STATE HOUSE 83rd MI

Candidate Name  
 MI Rep. John Espinoza

011  
 Category/  
 Type

Office Sought: ☒ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 83

Transaction ID: 26288659

Date of Disbursement

04 / 26 / 2007

Amount of Each Disbursement this Period

500.00

John Espinoza, STATE HOUSE  
 83rd MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1900.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Chuck Moss for State Representative

Mailing Address 1184 Dorchester

City  
Birmingham

State  
MI

Zip Code  
48009

Purpose of Disbursement  
Chuck Moss, STATE HOUSE 40th MI

Candidate Name  
Chuck Moss

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 40

Transaction ID: 26204541

Date of Disbursement

04 / 26 / 2007

Amount of Each Disbursement this Period

300.00

Chuck Moss, STATE HOUSE  
40th MI

Full Name (Last, First, Middle Initial)

**B.** Committee to Elect Samuel Buzz Thomas - Senate

Mailing Address 19260 Burlington Dr.

City  
Detroit

State  
MI

Zip Code  
48203

Purpose of Disbursement  
Samuel Thomas, STATE SENATE MI

Candidate Name  
Samuel Buzz Thomas

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 4

Transaction ID: 26232508

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

1000.00

Samuel Thomas, STATE SENA-  
TE MI

Full Name (Last, First, Middle Initial)

**C.** Committee to Elect Robert B. Jones

Mailing Address P.O. Box 2045

City  
Kalamazoo

State  
MI

Zip Code  
49003

Purpose of Disbursement  
Robert Jones, STATE HOUSE 60th MI

Candidate Name  
Robert B Jones

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 60

Transaction ID: 26288707

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

500.00

Robert Jones, STATE HOUSE  
60th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1800.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Rebekah Warren for State Representative

Mailing Address 234 Eighth St.

City Ann Arbor State MI Zip Code 48103

Purpose of Disbursement  
Rebekah Warren, STATE HOUSE 53rd MI

Candidate Name  
Rebekah Warren

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 53

Transaction ID: 26288809

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

500.00

Rebekah Warren, STATE HOUSE 53rd MI

Full Name (Last, First, Middle Initial)

**B.** Friends of Andy Meisner

Mailing Address 14100 Balfour

City Oak Park State MI Zip Code 48237

Purpose of Disbursement  
Andy Meisner, STATE HOUSE 27th MI

Candidate Name  
Andy Meisner

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 27

Transaction ID: 26288727

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

500.00

Andy Meisner, STATE HOUSE 27th MI

Full Name (Last, First, Middle Initial)

**C.** Friends of Doug Bennett

Mailing Address 2339 Windy Ridge Dr.

City Muskegon State MI Zip Code 49442

Purpose of Disbursement  
Doug Bennett, STATE HOUSE 92nd MI

Candidate Name  
Doug Bennett

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 92

Transaction ID: 26288730

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

500.00

Doug Bennett, STATE HOUSE 92nd MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1500.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
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| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Committee to Elect Joel Sheltroun**

Mailing Address 2225 Gray Rd.

City West Branch State MI Zip Code 48661

Purpose of Disbursement  
Joel Sheltroun, STATE HOUSE 103rd MI

Candidate Name  
Joel Sheltroun

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 10

Transaction ID: 26288424

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

500.00

Joel Sheltroun, STATE HOUSE 103rd MI

Full Name (Last, First, Middle Initial)

## **B. Ed Gaffney Leadership Committee**

Mailing Address 238 Kenwood Farms

City Grosse Pointe Farm State MI Zip Code 48236

Purpose of Disbursement

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State: District:

Transaction ID: 26313487

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. Friends of Jason Allen**

Mailing Address 415 Munson

City Traverse City State MI Zip Code 49686

Purpose of Disbursement  
Jason Allen, STATE SENATE MI

Candidate Name  
Representative Jason Allen

011  
Category/  
Type

Office Sought: ☐ House ☒ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 36

Transaction ID: 26288736

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

500.00

Jason Allen, STATE SENATE MI

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Committee to elect Rick Shaffer for State Represen**

Mailing Address 19958 Crescent Beach

City Three Rivers State MI Zip Code 49093

Purpose of Disbursement  
Rick Shaffer, STATE HOUSE 59th MI

Candidate Name  
Rick Shaffer

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 59

Transaction ID: 26288706

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

300.00

Rick Shaffer, STATE HOUSE  
59th MI

Full Name (Last, First, Middle Initial)

## **B. ROCC PAC**

Mailing Address 803 Lexington Blvd.

City Royal Oak State MI Zip Code 48073

Purpose of Disbursement

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 26313502

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Citizens for Mike Simpson**

Mailing Address P.O. Box 10

City Brooklyn State MI Zip Code 49230

Purpose of Disbursement  
Mike Simpson, STATE HOUSE 65th MI

Candidate Name  
MI Rep. Mike Simpson

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 65

Transaction ID: 26313480

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

1000.00

Mike Simpson, STATE HOUSE  
65th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1800.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Friends of Lisa Wojno

Mailing Address 27314 LaRose

City  
Warren

State  
MI

Zip Code  
48093

Purpose of Disbursement

Lisa Wojno, STATE HOUSE 28th MI

Candidate Name  
Lisa Wojno

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 28

Transaction ID: 26288743

Date of Disbursement

05 / 08 / 2007

Amount of Each Disbursement this Period

1000.00

Lisa Wojno, STATE HOUSE  
28th MI

Full Name (Last, First, Middle Initial)

**B.** Push for John Pastor

Mailing Address 31140 Lyndon

City  
Livonia

State  
MI

Zip Code  
48154

Purpose of Disbursement

John Pastor, STATE HOUSE 19th MI

Candidate Name  
John R Pastor

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 19

Transaction ID: 26288807

Date of Disbursement

05 / 08 / 2007

Amount of Each Disbursement this Period

300.00

John Pastor, STATE HOUSE  
19th MI

Full Name (Last, First, Middle Initial)

**C.** Aldo Vagnozzi for State Representative

Mailing Address 26193 Kiltartan

City  
Farmington Hills

State  
MI

Zip Code  
48334

Purpose of Disbursement

Aldo Vagnozzi, STATE HOUSE 37th MI

Candidate Name  
Aldo Vagnozzi

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 37

Transaction ID: 26204143

Date of Disbursement

05 / 09 / 2007

Amount of Each Disbursement this Period

500.00

Aldo Vagnozzi, STATE HOUSE  
37th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1800.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
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| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Tom George for Senate

Mailing Address P.O. Box 1265

City Kalamazoo State MI Zip Code 49002

Purpose of Disbursement  
Thomas George, STATE SENATE MI

Candidate Name  
MI Sen. Thomas George, M.D.

Office Sought: ☐ House ☒ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 20

Transaction ID: 26313504

Date of Disbursement

05 / 09 / 2007

Amount of Each Disbursement this Period

1000.00

Thomas George, STATE SENA-  
TE MI

Full Name (Last, First, Middle Initial)

**B.** Ron Jelinek for State Senator

Mailing Address 7605 W. Stickles Rd.

City Three Oaks State MI Zip Code 49128

Purpose of Disbursement  
Ron Jelinek, STATE SENATE MI

Candidate Name  
Representative Ron Jelinek

Office Sought: ☐ House ☒ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 21

Transaction ID: 26288813

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

1000.00

Ron Jelinek, STATE SENATE  
MI

Full Name (Last, First, Middle Initial)

**C.** Heartwell for Mayor

Mailing Address 82 Monroe

City Grand Rapids State MI Zip Code 49503

Purpose of Disbursement  
George Heartwell, Mayor MI

Candidate Name  
George Heartwell

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District:

Transaction ID: 26313544

Date of Disbursement

05 / 11 / 2007

Amount of Each Disbursement this Period

2500.00

George Heartwell, Mayor  
MI

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Friends to Elect Martha Scott**

Mailing Address 75 Rhode Island

City Highland Park State MI Zip Code 48203

Purpose of Disbursement  
Martha Scott, STATE SENATE MI

Candidate Name  
MI Sen. Martha Scott

Office Sought: ☐ House ☒ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 2

Transaction ID: 26288756

Date of Disbursement

05 / 16 / 2007

Amount of Each Disbursement this Period

1000.00

Martha Scott, STATE SENATE MI

Full Name (Last, First, Middle Initial)

## **B. Bob Constan for State Representative**

Mailing Address 5527 Heather Lane

City Dearborn Hts. State MI Zip Code 48125

Purpose of Disbursement  
Bob Constan, STATE HOUSE 16th MI

Candidate Name  
Bob Constan

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 16

Transaction ID: 26204165

Date of Disbursement

05 / 16 / 2007

Amount of Each Disbursement this Period

500.00

Bob Constan, STATE HOUSE 16th MI

Full Name (Last, First, Middle Initial)

## **C. Joan Bauer for State Representative**

Mailing Address 3105 S. Martin Luther King

City Lansing State MI Zip Code 48910

Purpose of Disbursement  
Joan Bauer, STATE HOUSE 68th MI

Candidate Name  
Joan Bauer

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 68

Transaction ID: 26288774

Date of Disbursement

05 / 16 / 2007

Amount of Each Disbursement this Period

500.00

Joan Bauer, STATE HOUSE 68th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Committee to Elect Terry Brown**

Mailing Address P.O. Box 75

City Pigeon State MI Zip Code 48755

Purpose of Disbursement  
Terry Brown, STATE HOUSE 84th MI

Candidate Name  
MI Rep. Terry Brown

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 84

Transaction ID: 26313484

Date of Disbursement

05 / 16 / 2007

Amount of Each Disbursement this Period

500.00

Terry Brown, STATE HOUSE  
84th MI

Full Name (Last, First, Middle Initial)

## **B. Sanborn for Senate**

Mailing Address 48945 VanDyke  
Suite 10A

City Shelby Twp. State MI Zip Code 48917

Purpose of Disbursement  
Alan Sanborn, STATE SENATE MI

Candidate Name  
MI Sen. Alan Sanborn

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 12

Transaction ID: 26288814

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

1000.00

Alan Sanborn, STATE SENATE  
MI

Full Name (Last, First, Middle Initial)

## **C. bluePAC**

Mailing Address 1310 G. Street, N.W.

City Washington State DC Zip Code 20005

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 26204164

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

10000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

11500.00

**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  
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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Friends of Ken Cockrel, Jr.

Mailing Address 4815 Avery

City  
Detroit

State  
MI

Zip Code  
48208

Purpose of Disbursement

Ken Cockrel, Detroit City Council MI

Candidate Name

Mr. Ken Cockrel, Jr.

011  
Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

2008

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI

District:

Transaction ID: 26288740

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

300.00

Ken Cockrel, Detroit City  
Council MI

Full Name (Last, First, Middle Initial)

**B.** Schauer 21st Century Fund

Mailing Address 15 N. Broad St.

City  
Battle Creek

State  
MI

Zip Code  
49017

Purpose of Disbursement

Mark Schauer, STATE SENATE MI

Candidate Name

011  
Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

2008

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: 26288815

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

1000.00

Mark Schauer, STATE SENATE  
MI

Full Name (Last, First, Middle Initial)

**C.** Detroit Regional Chamber PAC II

Mailing Address 101 S. Washington Sq.  
Suite 820

City  
Lansing

State  
MI

Zip Code  
48933

Purpose of Disbursement

Candidate Name

011  
Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

2008

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: 26313525

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

2625.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3925.00

**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  
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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Committee to Elect Dave Hildenbrand**

Mailing Address 2700 Timpson Ave. SE

City Lowell State MI Zip Code 49331

Purpose of Disbursement  
Dave Hildenbrand, STATE HOUSE 86th MI

Candidate Name  
Dave Hildenbrand

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 86

Transaction ID: 26232522

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

600.00

Dave Hildenbrand, STATE  
HOUSE 86th MI

Full Name (Last, First, Middle Initial)

**B. Committee to Elect Shanelle Jackson**

Mailing Address 19413 Burton Rd.

City Detroit State MI Zip Code 48219

Purpose of Disbursement  
Shanelle Jackson, STATE HOUSE 9th MI

Candidate Name  
Shanelle Jackson

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 9

Transaction ID: 26313482

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

500.00

Shanelle Jackson, STATE  
HOUSE 9th MI

Full Name (Last, First, Middle Initial)

**C. Friends of Glenn Steil, Jr., for State Representat**

Mailing Address 4828 Greenhill Ct.

City Grand Rapids State MI Zip Code 49546

Purpose of Disbursement  
Glenn Steil, STATE HOUSE 72nd MI

Candidate Name  
Glenn Steil, Jr.

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 72

Transaction ID: 26288734

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

300.00

Glenn Steil, STATE HOUSE  
72nd MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1400.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Howard C. Walker for State Representative

Mailing Address 423 E. Eighth St.

City Traverse City State MI Zip Code 49686

Purpose of Disbursement  
Howard Walker, STATE HOUSE 104th MI

Candidate Name  
Howard C. Walker

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 10

Transaction ID: 26288771

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

300.00

Howard Walker, STATE HOUSE  
104th MI

Full Name (Last, First, Middle Initial)

**B.** Dave Robertson for Representative

Mailing Address P.O. Box 181

City Grand Blanc State MI Zip Code 48439

Purpose of Disbursement  
David Robertson, STATE HOUSE 51st MI

Candidate Name  
MI Rep. David Robertson

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 51

Transaction ID: 26288720

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

300.00

David Robertson, STATE HO-  
USE 51st MI

Full Name (Last, First, Middle Initial)

**C.** Lorence Wenke for a Better Michigan

Mailing Address 2525 N. 30th St.

City Kalamazoo State MI Zip Code 49048

Purpose of Disbursement  
Lorence Wenke, STATE HOUSE 63rd MI

Candidate Name  
Lorence Wenke

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 63

Transaction ID: 26288786

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

300.00

Lorence Wenke, STATE HOUSE  
63rd MI

**SUBTOTAL** of Disbursements This Page (optional) .....

900.00

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

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

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Joe Hune for State Representative

Mailing Address 4849 Hogback Rd

City Fowlerville State MI Zip Code 48836

Purpose of Disbursement  
Joe Hune, STATE HOUSE 47th MI

Candidate Name  
Joe Hune

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 47

Transaction ID: 26288775

Date of Disbursement

05 / 29 / 2007

Amount of Each Disbursement this Period

1000.00

Joe Hune, STATE HOUSE 47th MI

Full Name (Last, First, Middle Initial)

**B.** Phillip J. LaJoy for State Representative

Mailing Address 1256 Crowndale Ln.

City Canton State MI Zip Code 48188

Purpose of Disbursement  
Phillip LaJoy, STATE HOUSE 21st MI

Candidate Name  
Phillip J. LaJoy

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 21

Transaction ID: 26288806

Date of Disbursement

06 / 04 / 2007

Amount of Each Disbursement this Period

500.00

Phillip LaJoy, STATE HOUSE 21st MI

Full Name (Last, First, Middle Initial)

**C.** Supporters of Gary McDowell

Mailing Address 10820 Glen St.

City Rudyard State MI Zip Code 49780

Purpose of Disbursement  
Gary McDowell, STATE HOUSE 107th MI

Candidate Name  
MI Rep. Gary McDowell

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 10

Transaction ID: 26288823

Date of Disbursement

06 / 06 / 2007

Amount of Each Disbursement this Period

500.00

Gary McDowell, STATE HOUSE 107th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

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

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

Use separate schedule(s)  
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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Committee to Elect Steve Lindberg**

Mailing Address P.O. Box 109

City  
Marquette

State  
MI

Zip Code  
49855

Purpose of Disbursement  
Steve Lindberg, STATE HOUSE 109th MI

Candidate Name  
Steve Lindberg

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 10

Transaction ID: 26313483

Date of Disbursement

06 / 06 / 2007

Amount of Each Disbursement this Period

500.00

Steve Lindberg, STATE HOUSE 109th MI

Full Name (Last, First, Middle Initial)

## **B. Martin Griffin for State Representative**

Mailing Address 705 S. Grinnell

City  
Jackson

State  
MI

Zip Code  
49203

Purpose of Disbursement  
Martin Griffin, STATE HOUSE 64th MI

Candidate Name  
MI Rep. Martin Griffin

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 64

Transaction ID: 26313501

Date of Disbursement

06 / 06 / 2007

Amount of Each Disbursement this Period

300.00

Martin Griffin, STATE HOUSE 64th MI

Full Name (Last, First, Middle Initial)

## **C. Michigan House Democratic Fund**

Mailing Address P.O. Box 16193

City  
Lansing

State  
MI

Zip Code  
48909

Purpose of Disbursement

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 26288795

Date of Disbursement

06 / 07 / 2007

Amount of Each Disbursement this Period

6500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7300.00

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

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

Use separate schedule(s)  
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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Gilbert for State Senate

Mailing Address 9882 N. River Rd.

City Algonac State MI Zip Code 48001

Purpose of Disbursement  
Jud Gilbert, STATE HOUSE 82nd MI

Candidate Name  
Representative Jud Gilbert

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President  
Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 82

Transaction ID: 26288779

Date of Disbursement

06 / 08 / 2007

Amount of Each Disbursement this Period

800.00

Jud Gilbert, STATE HOUSE  
82nd MI

Full Name (Last, First, Middle Initial)

**B.** Randy Richardville for Senate

Mailing Address P.O. Box 1631

City Monroe State MI Zip Code 48161

Purpose of Disbursement  
Randy Richardville, STATE SENATE MI

Candidate Name  
Randy Richardville

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President  
Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 17

Transaction ID: 26288812

Date of Disbursement

06 / 08 / 2007

Amount of Each Disbursement this Period

1000.00

Randy Richardville, STATE  
SENATE MI

Full Name (Last, First, Middle Initial)

**C.** Granholm Leadership fund

Mailing Address 210 Brookstone Cir.

City Dewitt State MI Zip Code 48820

Purpose of Disbursement

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 26288763

Date of Disbursement

06 / 11 / 2007

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6800.00

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



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

Use separate schedule(s)  
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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Barb Byrum for State Representative

Mailing Address P.O. Box 27344

City  
Lansing

State  
MI

Zip Code  
48909

Purpose of Disbursement

Barb Byrum, STATE HOUSE 67th MI

Candidate Name  
Barb Byrum

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 67

Transaction ID: 26204149

Date of Disbursement

06 / 12 / 2007

Amount of Each Disbursement this Period

500.00

Barb Byrum, STATE HOUSE  
67th MI

Full Name (Last, First, Middle Initial)

**B.** Citizens for Alma Wheeler-Smith

Mailing Address P.O. Box 970977

City  
Ypsilanti

State  
MI

Zip Code  
48197

Purpose of Disbursement

Alma Wheeler-Smith, STATE HOUSE 54th MI

Candidate Name  
Alma Wheeler-Smith

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 54

Transaction ID: 26232051

Date of Disbursement

06 / 13 / 2007

Amount of Each Disbursement this Period

500.00

Alma Wheeler-Smith, STATE  
HOUSE 54th MI

Full Name (Last, First, Middle Initial)

**C.** Friends of Roger Kahn

Mailing Address P.O. Box 1627

City  
Saginaw

State  
MI

Zip Code  
49605

Purpose of Disbursement

Roger Kahn, STATE HOUSE 94th MI

Candidate Name  
Roger Kahn

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 94

Transaction ID: 26288752

Date of Disbursement

06 / 13 / 2007

Amount of Each Disbursement this Period

1000.00

Roger Kahn, STATE HOUSE  
94th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

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

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

Use separate schedule(s)  
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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Citizens Supporting Mike Nofs**

Mailing Address P.O. Box 219

City State Zip Code  
Battle Creek MI 49016

Purpose of Disbursement  
Mike Nofs, STATE HOUSE 67th MI

Candidate Name  
Mike Nofs

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 67

Transaction ID: 26232166

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

700.00

Mike Nofs, STATE HOUSE 67-th MI

Full Name (Last, First, Middle Initial)

## **B. Citizens for John J. Gleason**

Mailing Address 2617 Macomber

City State Zip Code  
Flint MI 48503

Purpose of Disbursement  
John Gleason, STATE SENATE MI

Candidate Name  
John Gleason

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 27

Transaction ID: 26232159

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

1100.00

John Gleason, STATE SENATE MI

Full Name (Last, First, Middle Initial)

## **C. Kuipers for Senate**

Mailing Address 364 W. 31st St.

City State Zip Code  
Holland MI 49423

Purpose of Disbursement  
Wayne Kuipers, STATE SENATE MI

Candidate Name  
MI Sen. Wayne Kuipers

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 30

Transaction ID: 26288783

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

800.00

Wayne Kuipers, STATE SENA-TE MI

**SUBTOTAL** of Disbursements This Page (optional) .....

2600.00

**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  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Friends of Michael G. Sak State

Mailing Address 236 Valley Ave., NW

City Grand Rapids State MI Zip Code 49504

Purpose of Disbursement  
Michael Sak, STATE HOUSE 76th MI

Candidate Name  
Michael G Sak

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 76

Transaction ID: 26288753

Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

1000.00

Michael Sak, STATE HOUSE  
76th MI

Full Name (Last, First, Middle Initial)

**B.** Committee to Elect Rosalyn Bliss

Mailing Address P.O. Box 3655

City Grand Rapids State MI Zip Code 49503

Purpose of Disbursement  
Rosalyn Bliss, Grand Rapids City Commiss

Candidate Name  
Rosalyn Bliss

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District:

Transaction ID: 26313481

Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

250.00

Rosalyn Bliss, Grand Rapids City Commissioner MI

Full Name (Last, First, Middle Initial)

**C.** Friends of Liz Brater

Mailing Address P.O. Box 7955

City Ann Arbor State MI Zip Code 48107

Purpose of Disbursement  
Liz Brater, STATE SENATE MI

Candidate Name  
Liz Brater

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 18

Transaction ID: 26288744

Date of Disbursement

06 / 19 / 2007

Amount of Each Disbursement this Period

1000.00

Liz Brater, STATE SENATE  
MI

**SUBTOTAL** of Disbursements This Page (optional) .....

2250.00

**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  
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(check only one)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Brian Calley for State Representative

Mailing Address 10198 Butler

City  
Portland

State  
MI

Zip Code  
48875

Purpose of Disbursement

Brian Calley, STATE HOUSE 87th MI

Candidate Name  
Brian Calley

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 87

Transaction ID: 26204195

Date of Disbursement

06 / 19 / 2007

Amount of Each Disbursement this Period

500.00

Brian Calley, STATE HOUSE  
87th MI

Full Name (Last, First, Middle Initial)

**B.** Green Team Majority Fund

Mailing Address 4754 Karel Jean Ct. S.W.

City  
Wyoming

State  
MI

Zip Code  
49519

Purpose of Disbursement

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 26288766

Date of Disbursement

06 / 20 / 2007

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C.** Jim Marleau for State Representative

Mailing Address 1437 Nakomis

City  
Lake Orion

State  
MI

Zip Code  
48362

Purpose of Disbursement

Jim Marleau, STATE HOUSE 46th MI

Candidate Name  
Jim Marleau

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 46

Transaction ID: 26288773

Date of Disbursement

06 / 21 / 2007

Amount of Each Disbursement this Period

600.00

Jim Marleau, STATE HOUSE  
46th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1600.00

**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  
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FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Burotn Leland for Detroit

Mailing Address 17254 Bentler

City State Zip Code  
 Detroit MI 48219

Purpose of Disbursement  
 Burton Leland, Wayne County Commissioner

Candidate Name  
 Burton Leland

011  
 Category/  
 Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District:

Transaction ID: 26313479

Date of Disbursement

06 / 21 / 2007

Amount of Each Disbursement this Period

500.00

Burton Leland, Wayne County Commissioner MI

Full Name (Last, First, Middle Initial)

**B.** McManus for Senate

Mailing Address 7883 E. Alpers

City State Zip Code  
 Lake Lelanau MI 49653

Purpose of Disbursement  
 Michelle McManus, STATE SENATE MI

Candidate Name  
 Michelle McManus

011  
 Category/  
 Type

Office Sought: ☐ House ☒ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 35

Transaction ID: 26288712

Date of Disbursement

06 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

Michelle McManus, STATE SENATE MI

Full Name (Last, First, Middle Initial)

**C.** JDC Genesee Fund

Mailing Address 12405 Jennings Rd.

City State Zip Code  
 Linden MI 48451

Purpose of Disbursement

Candidate Name

011  
 Category/  
 Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 26288772

Date of Disbursement

06 / 22 / 2007

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6500.00

**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)

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|                              |                              |                              |                              |  |                              |
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| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

## **A. Committee to Elect Goeff Hansen**

Mailing Address P.O. Box 167

City State Zip Code  
Hart MI 49420

Purpose of Disbursement  
Goef Hansen, STATE HOUSE 100th MI

Candidate Name  
Goef Hansen

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 10

Transaction ID: 26288369

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

Goef Hansen, STATE HOUSE  
100th MI

Full Name (Last, First, Middle Initial)

## **B. Bruce Caswell for State Representative**

Mailing Address 8940 E. Bacon Rd.

City State Zip Code  
Hillsdale MI 49242

Purpose of Disbursement  
Bruce Caswell, STATE HOUSE 58th MI

Candidate Name  
Bruce Caswell

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 58

Transaction ID: 26204198

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

Bruce Caswell, STATE HOUSE  
58th MI

Full Name (Last, First, Middle Initial)

## **C. Committee to Elect Frank Accavitti, Jr.**

Mailing Address 15506 South Park

City State Zip Code  
Eastpointe MI 48021

Purpose of Disbursement  
Frank Accavitti, STATE HOUSE 42nd MI

Candidate Name  
Frank Accavitti, Jr.

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 42

Transaction ID: 26288364

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Frank Accavitti, STATE HO-  
USE 42nd MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1200.00

**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)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A.** Pam Byrnes for State Representative

Mailing Address 17381 N. M-52

City Chelsea State MI Zip Code 48118

Purpose of Disbursement  
Pamela Byrnes, STATE HOUSE 52nd MI

Candidate Name  
MI Rep. Pamela Byrnes

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MI District: 52

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: 26288801

Date of Disbursement

06 / 28 / 2007

Amount of Each Disbursement this Period

250.00

Pamela Byrnes, STATE HOUSE  
52nd MI

Full Name (Last, First, Middle Initial)

**B.** No VI Leadership Fund

Mailing Address P.O. Box 14173

City Lansing State MI Zip Code 48901

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 26288798

Date of Disbursement

06 / 29 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Dudley Spade for State Representative

Mailing Address P.O. Box 157

City Tipton State MI Zip Code 49287

Purpose of Disbursement  
Dudley Spade, STATE HOUSE 57th MI

Candidate Name  
Dudley Spade

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MI District: 57

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: 26288725

Date of Disbursement

06 / 29 / 2007

Amount of Each Disbursement this Period

150.00

Dudley Spade, STATE HOUSE  
57th MI

**SUBTOTAL** of Disbursements This Page (optional) .....

1400.00

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

200778.00