

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
BLUEPAC - Blue Cross Blue Shield Association PAC

ADDRESS (number and street) 1310 G Street NW
 Check if different than previously reported. (ACC)
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00194746
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 02 01 2010 through 02 28 2010

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 Kathy Didawick

Signature of Treasurer Electronically Filed by Kathy Didawick Date 03 08 2010

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									
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
BLUEPAC - Blue Cross Blue Shield Association PAC

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		38783.69
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	59974.46									
(c) Total Receipts (from Line 19)	17248.84	38439.61								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	77223.30	77223.30								
7. Total Disbursements (from Line 31)	37250.00	37250.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	39973.30	39973.30								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

Write or Type Committee Name

BLUEPAC - Blue Cross Blue Shield Association PAC

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	2440.60	5375.20
(ii) Unitemized	7623.83	16195.24
(iii) TOTAL (add Lines 11(a)(i) and (ii)	10064.43	21570.44
(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)	10064.43	21570.44
12. Transfers From Affiliated/Other Party Committees	5684.00	15368.00
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	1500.00	1500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.41	1.17
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))	17248.84	38439.61
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17248.84	38439.61

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B 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.....	37250.00	37250.00
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.....	0.00	0.00
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))..	37250.00	37250.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	37250.00	37250.00

DETAILED SUMMARY PAGE
of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	10064.43	21570.44
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10064.43	21570.44
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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)
BLUEPAC - Blue Cross Blue Shield Association PAC

A.	Full Name (Last, First, Middle Initial) Paul F. Brown		Date of Receipt MM / DD / YYYY 02 / 05 / 2010
	Mailing Address 406 16th Street		Transaction ID: 00205.C146849
	City Wilmette	State IL	Zip Code 60091
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Blue Cross Blue Shield As- socio	Occupation Manager	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.00	Payroll Deduction: (50.00- /Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) William James Colbourne		Date of Receipt MM / DD / YYYY 02 / 05 / 2010
	Mailing Address 551 Woodvale Ave		Transaction ID: 00205.C146800
	City Deerfield	State IL	Zip Code 60015-2364
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 130.00
	Name of Employer Blue Cross/blue Shield As- socio	Occupation Director	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	Payroll Deduction: (65.00- /Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Kathy Didawick		Date of Receipt MM / DD / YYYY 02 / 05 / 2010
	Mailing Address 3015 S 7th Street		Transaction ID: 00205.C146803
	City Arlington	State DC	Zip Code 22204
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
	Name of Employer Blue Cross Blue Shield As- socio	Occupation Treasurer, Blue Pac	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	Payroll Deduction: (60.00- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	350.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUEPAC - Blue Cross Blue Shield Association PAC

A.	Full Name (Last, First, Middle Initial) John T. Ericksen	Date of Receipt MM / DD / YYYY 02 / 05 / 2010
	Mailing Address 1310 G Street, N.w.	Transaction ID: 00205.C146804
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer: Blue Cross/blue Shield As-socia Occupation: Exec. Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00	Payroll Deduction: (50.00- /Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Regina H. Favors	Date of Receipt MM / DD / YYYY 02 / 16 / 2010
	Mailing Address 1310 G Street, N.w.	Transaction ID: 00308.C146970
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer: Bc/bs Of Arkansas Occupation: Health Insurer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	Payroll Deduction: (50.00- /Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Alissa T. Fox	Date of Receipt MM / DD / YYYY 02 / 05 / 2010
	Mailing Address 1310 G Street, N.w.	Transaction ID: 00205.C146875
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 196.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer: Blue Cross/blue Shield As-socia Occupation: Exec. Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 392.00	Payroll Deduction: (98.00- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	396.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUEPAC - Blue Cross Blue Shield Association PAC

A.	Full Name (Last, First, Middle Initial) Stephen Gammarino	Date of Receipt MM / DD / YYYY 02 / 05 / 2010
	Mailing Address 17109 Flatwood Dr.	Transaction ID: 00205.C146808
	City State Zip Code Rockville MD 20855	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (50.00- /Bi-Weekly)
Name of Employer Blue Cross Blue Shield As- socia	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

B.	Full Name (Last, First, Middle Initial) Justine Handelman	Date of Receipt MM / DD / YYYY 02 / 05 / 2010
	Mailing Address 3304 Ferndale Avenue	Transaction ID: 00205.C146812
	City State Zip Code Kensington MD 20815	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (50.00- /Bi-Weekly)
Name of Employer Blue Cross Blue Shield As- socia	Occupation Executive Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

C.	Full Name (Last, First, Middle Initial) Philip Hays	Date of Receipt MM / DD / YYYY 02 / 05 / 2010
	Mailing Address 1310 G Street, NW	Transaction ID: 00205.C146857
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (60.00- /Bi-Weekly)
Name of Employer Bcbs Association	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	320.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUEPAC - Blue Cross Blue Shield Association PAC

A.	Full Name (Last, First, Middle Initial) William Andrew Hensley	Date of Receipt MM / DD / YYYY 02 / 05 / 2010
	Mailing Address 1310 G Street, N.w.	Transaction ID: 00205.C146816
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (60.00- /Bi-Weekly)
Name of Employer Blue Cross/blue Shield As- socia	Occupation Vp	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

B.	Full Name (Last, First, Middle Initial) Robert Kolodgy	Date of Receipt MM / DD / YYYY 02 / 05 / 2010
	Mailing Address 545 N Dearborn St	Transaction ID: 00205.C146868
	City State Zip Code Chicago IL 60610-7469	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (60.00- /Bi-Weekly)
Name of Employer Bc/bS Association	Occupation Svp	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Allan M. Korn	Date of Receipt MM / DD / YYYY 02 / 05 / 2010
	Mailing Address 1310 G Street, N.w.	Transaction ID: 00205.C146821
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 130.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (65.00- /Bi-Weekly)
Name of Employer Blue Cross/blue Shield As- socia	Occupation Chief Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	370.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 22
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
BLUEPAC - Blue Cross Blue Shield Association PAC

A.

Full Name (Last, First, Middle Initial)
William O'Loughlin

Mailing Address 1310 G St NW

City Washington State DC Zip Code 20005-3000

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

Name of Employer Blue Cross Blue Shield As-soc. Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 02 / 05 / 2010

Transaction ID: 00205.C146872

Amount of Each Receipt this Period 100.00

Receipt

Payroll Deduction: (50.00- /Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Doug Porter

Mailing Address 1310 G St NW Fl 12 12 fl

City Washington State DC Zip Code 20005-3004

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

Name of Employer Blue Cross & Blue Shield Assoc Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 02 / 05 / 2010

Transaction ID: 00205.C146874

Amount of Each Receipt this Period 100.00

Receipt

Payroll Deduction: (50.00- /Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Scott P. Serota

Mailing Address 1310 G Street, NW

City Washington State DC Zip Code 20005

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

Name of Employer Blue Cross Blue Shield As-sn. Occupation Ceo

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 769.20

Date of Receipt 02 / 05 / 2010

Transaction ID: 00205.C146831

Amount of Each Receipt this Period 384.60

Receipt

Payroll Deduction: (192.3- 0/Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **584.60**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLUEPAC - Blue Cross Blue Shield Association PAC

A.	Full Name (Last, First, Middle Initial) Patricia Taylor	Date of Receipt MM / DD / YYYY 02 / 05 / 2010
	Mailing Address 5226 Cahaba Valley Cove	Transaction ID: 00205.C146838
	City State Zip Code Miami FL 33242	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Bc/bs Association Occupation Ex. Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00	Payroll Deduction: (50.00- /Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) James B. Trimble	Date of Receipt MM / DD / YYYY 02 / 05 / 2010
	Mailing Address 1310 G Street N.w.	Transaction ID: 00205.C146836
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Blue Cross/blue Shield As- socio Occupation Manager, Congressional Communi Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	Payroll Deduction: (60.00- /Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Jennifer Vachon	Date of Receipt MM / DD / YYYY 02 / 05 / 2010
	Mailing Address 1310 G St NW	Transaction ID: 00205.C146876
	City State Zip Code Washington DC 20005-3000	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer B/bs Association Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00	Payroll Deduction: (50.00- /Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	320.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 12 / 22	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUEPAC - Blue Cross Blue Shield Association PAC

A.	Full Name (Last, First, Middle Initial) Paul Von Ebers		Date of Receipt																					
	Mailing Address 26 Thomas Grv		<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>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	6		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	2		2	6		2	0	1	0														
	City State Zip Code Pittsford NY 14534-3066		Transaction ID: 00308.C147966																					
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00																					
Name of Employer Excellus BlueCross BlueShield		Occupation Evp/coo																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.00																						
		Receipt Payroll Deduction: (100.0-0/Bi-Weekly)																						

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	2440.60

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

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

FOR LINE NUMBER: PAGE 13 / 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLUEPAC - Blue Cross Blue Shield Association PAC

A.

Full Name (Last, First, Middle Initial)
 BCBS of Kansas

Mailing Address 1133 Topeka Boulevard, SW

City State Zip Code
 Topeka KS 66629-

FEC ID number of contributing federal political committee. **C** C00197202

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1368.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 2 6 / 2 0 1 0

Transaction ID: 00308.C147943

Amount of Each Receipt this Period
 684.00

Transfers From Affil./Aut-h.

B.

Full Name (Last, First, Middle Initial)
 Highmark Health PAC

Mailing Address 1800 Center Street

City State Zip Code
 Camp Hill PA 17089-0089

FEC ID number of contributing federal political committee. **C** C00302844

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 1 6 / 2 0 1 0

Transaction ID: 00308.C146944

Amount of Each Receipt this Period
 4000.00

Transfers From Affil./Aut-h.

C.

Full Name (Last, First, Middle Initial)
 Independence Blue Cross PAC (IBC PAC)

Mailing Address 1901 Market St

City State Zip Code
 Philadelphia PA 19103-1400

FEC ID number of contributing federal political committee. **C** C00450056

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 2 6 / 2 0 1 0

Transaction ID: 00308.C147944

Amount of Each Receipt this Period
 1000.00

Transfers From Affil./Aut-h.

SUBTOTAL of Receipts This Page (optional)	684.00
TOTAL This Period (last page this line number only)	5684.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 22
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
		<input checked="" type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUEPAC - Blue Cross Blue Shield Association PAC

A.	Full Name (Last, First, Middle Initial) Tenn PAC		Date of Receipt
	Mailing Address 228 S. Washington Suite 115		<input type="text" value="02"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
	City Alexandria	State VA	Zip Code 22314-
	FEC ID number of contributing federal political committee. C C00388421		Transaction ID: 00308.C146943
	Name of Employer	Occupation	Amount of Each Receipt this Period 1500.00
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	Refund of Contribution Made

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	1500.00

**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 15 / 22

<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)
BLUEPAC - Blue Cross Blue Shield Association PAC

A.	Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN SENATORIAL COMMITTEE	Transaction ID: 00205.E2514 Date of Disbursement 02 / 05 / 2010
	Mailing Address 425 2nd Street, NE	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20002-	
	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type
	Candidate Name NATIONAL REPUBLICAN SENATORIAL COMMITTEE	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: ANNUAL/OTHER	DIRECT CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE	Transaction ID: 00205.E2512 Date of Disbursement 02 / 05 / 2010
	Mailing Address 120 Maryland Avenue, NE	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20003-	
	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type
	Candidate Name DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: ANNUAL/OTHER	DIRECT CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	Transaction ID: 00308.E2519 Date of Disbursement 02 / 22 / 2010
	Mailing Address 310 1st St SE	Amount of Each Disbursement this Period 2500.00
	City Washington State DC Zip Code 20003-1885	
	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type
	Candidate Name NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: ANNUAL/OTHER	DIRECT CONTRIBUTION

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)

<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)
BLUEPAC - Blue Cross Blue Shield Association PAC

A.	Full Name (Last, First, Middle Initial) NEXT CENTURY FUND	Transaction ID: 00308.E2516 Date of Disbursement 02 / 12 / 2010
	Mailing Address 116 S Royal St	Amount of Each Disbursement this Period 2000.00
	City Alexandria State VA Zip Code 22314-3328	
	Purpose of Disbursement DIRECT CONTRIBUTION	Category/Type
	Candidate Name NEXT CENTURY FUND	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: ANNUAL/OTHER	DIRECT CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) Citizens for Altmire	Transaction ID: 00308.E2520 Date of Disbursement 02 / 22 / 2010
	Mailing Address 499 South Capitol Street SE Suite 404	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20003-	
	Purpose of Disbursement DIRECT CONTRIBUTION	Category/Type
	Candidate Name JASON ALTMIRE	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 04	DIRECT CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) BLUE DOG POLITICAL ACTION COMMITTEE	Transaction ID: 00308.E2527 Date of Disbursement 02 / 26 / 2010
	Mailing Address 236 Massachusetts Ave., NE Suite 508	Amount of Each Disbursement this Period 2000.00
	City Washington State DC Zip Code 20002-	
	Purpose of Disbursement DIRECT CONTRIBUTION	Category/Type
	Candidate Name BLUE DOG POLITICAL ACTION COMMITTEE	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: ANNUAL/OTHER	DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)	5000.00
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)

<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)
BLUEPAC - Blue Cross Blue Shield Association PAC

<p>A. Full Name (Last, First, Middle Initial) Charles Boustany for Congress, Inc.</p> <p>Mailing Address PO Box 80126</p> <p>City Lafayette State LA Zip Code 70598-0126</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name CHARLES DR. BOUSTANY, JR.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 07</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00308.E2521 Date of Disbursement 02 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>DIRECT CONTRIBUTION</p>
<p>B. Full Name (Last, First, Middle Initial) EVERY REPUBLICAN IS CRUCIAL (ERICPAC)</p> <p>Mailing Address 25 East Main Street</p> <p>City Richmond State VA Zip Code 23219-</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name EVERY REPUBLICAN IS CRUCIAL (ERICPAC)</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ ANNUAL/OTHER</p>	<p>Transaction ID: 00308.E2518 Date of Disbursement 02 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 1250.00</p> <p>DIRECT CONTRIBUTION</p>
<p>C. Full Name (Last, First, Middle Initial) Castle Campaign Fund</p> <p>Mailing Address PO Box 133</p> <p>City Wilmington State DE Zip Code 19899-0133</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name MICHAEL N CASTLE</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00308.E2533 Date of Disbursement 02 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>DIRECT CONTRIBUTION</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3250.00

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)

<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)
BLUEPAC - Blue Cross Blue Shield Association PAC

A.	Full Name (Last, First, Middle Initial) Castle Campaign Fund	Transaction ID: 00308.E2532 Date of Disbursement 02 / 26 / 2010
	Mailing Address PO Box 133	Amount of Each Disbursement this Period 1000.00
	City Wilmington State DE Zip Code 19899-0133	
	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type
	Candidate Name MICHAEL N CASTLE	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DIRECT CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) Davis for Congress	Transaction ID: 00308.E2525 Date of Disbursement 02 / 26 / 2010
	Mailing Address 700 12th St NW	Amount of Each Disbursement this Period 2000.00
	City Washington State DC Zip Code 20005-3945	
	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type
	Candidate Name GEOFFREY C. DAVIS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DIRECT CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) Garrett for Congress	Transaction ID: 00308.E2522 Date of Disbursement 02 / 22 / 2010
	Mailing Address P.O. Box 905	Amount of Each Disbursement this Period 1000.00
	City Newton State NJ Zip Code 07860-0905	
	Purpose of Disbursement DIRECT CONTRIBUTION	Category/ Type
	Candidate Name SCOTT GARRETT	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)	4000.00
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)
BLUEPAC - Blue Cross Blue Shield Association PAC

A.	Full Name (Last, First, Middle Initial) Herseth-Sandlin for Congress <hr/> Mailing Address P.O. Box 75214 <hr/> City Washington State DC Zip Code 20013-5214 <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name HERSETH SANDLIN, STEPHANIE M <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: SD District: 00	Transaction ID: 00308.E2528 Date of Disbursement 02 / 26 / 2010	Amount of Each Disbursement this Period 1500.00 <hr/> DIRECT CONTRIBUTION
B.	Full Name (Last, First, Middle Initial) Friends of Congressman Holden <hr/> Mailing Address PO Box 37 <hr/> City Saint Clair State PA Zip Code 17970-0037 <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name T. TIMOTHY HOLDEN <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 17	Transaction ID: 00205.E2513 Date of Disbursement 02 / 05 / 2010	Amount of Each Disbursement this Period 2000.00 <hr/> DIRECT CONTRIBUTION
C.	Full Name (Last, First, Middle Initial) Georgians for Isakson <hr/> Mailing Address PO Box 250156 <hr/> City Atlanta State GA Zip Code 30325-1156 <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name JOHN HARDY ISAKSON <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: GA District: 00	Transaction ID: 00308.E2530 Date of Disbursement 02 / 26 / 2010	Amount of Each Disbursement this Period 1000.00 <hr/> DIRECT CONTRIBUTION

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)

<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)
BLUEPAC - Blue Cross Blue Shield Association PAC

A.	Full Name (Last, First, Middle Initial) Friends of John McCain	Transaction ID: 00308.E2523 Date of Disbursement 02 / 22 / 2010
	Mailing Address 211 N. Union Street Suite 200	Amount of Each Disbursement this Period 1000.00
	City Alexandria State VA Zip Code 22314- Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name JOHN S MCCAIN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	DIRECT CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) Moderate Democratic PAC	Transaction ID: 00308.E2526 Date of Disbursement 02 / 26 / 2010
	Mailing Address 425 2nd St NE	Amount of Each Disbursement this Period 2000.00
	City Washington State DC Zip Code 20002-4914 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ ANNUAL/OTHER	DIRECT CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) Tim Murphy for Congress	Transaction ID: 00205.E2515 Date of Disbursement 02 / 05 / 2010
	Mailing Address 700 12th St NW Ste 700	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20005-4052 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name TIM MURPHY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 18 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)	4000.00
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)

<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)
BLUEPAC - Blue Cross Blue Shield Association PAC

A.	Full Name (Last, First, Middle Initial) Jane Norton for Colorado	Transaction ID: 00308.E2531 Date of Disbursement 02 / 26 / 2010
	Mailing Address PO Box 3008	
	City Englewood State CO Zip Code 80155-3008	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name JANE BERGMAN NORTON Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CO District: 00	DIRECT CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) Friends of Glenn Nye	Transaction ID: 00308.E2524 Date of Disbursement 02 / 22 / 2010
	Mailing Address 499 S Capitol St SW Ste 404	
	City Washington State DC Zip Code 20003-4004	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name GLENN CARLYLE NYE, III Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: VA District: 02	DIRECT CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) Friends of Glenn Nye	Transaction ID: 00308.E2517 Date of Disbursement 02 / 22 / 2010
	Mailing Address 499 S Capitol St SW Ste 404	
	City Washington State DC Zip Code 20003-4004	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name GLENN CARLYLE NYE, III Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: VA District: 02	DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)	3000.00
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 22 / 22

<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)
BLUEPAC - Blue Cross Blue Shield Association PAC

A.

Full Name (Last, First, Middle Initial)
PRESERVING AMERICAS TRADITIONS (PATPAC)

Transaction ID: 00308.E2529

Date of Disbursement

Mailing Address 1100 G Street, NW
Suite 800

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	1	0

City Alexandria State VA Zip Code 22314-

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
DIRECT CONTRIBUTION

--

Category/
Type

Candidate Name
PRESERVING AMERICAS TRADITIONS (PATPAC)

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

DIRECT CONTRIBUTION

State: District:

ANNUAL/OTHER

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

37250.00
