

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 06 01 2008 through 06 30 2008

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 09 10 2008

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	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		47839.93
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	33398.07									
(c) Total Receipts (from Line 19)	43618.34	167549.48								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	77016.41	215389.41								
7. Total Disbursements (from Line 31)	32000.00	170373.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	45016.41	45016.41								
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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	16147.60	41499.90
(i) Itemized (use Schedule A)	4709.14	31833.56
(ii) Unitemized	20856.74	73333.46
(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)	20856.74	73333.46
12. Transfers From Affiliated/Other Party Committees	22727.18	92962.60
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	0.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	34.42	253.42
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))	43618.34	167549.48
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	43618.34	167549.48

DETAILED SUMMARY PAGE

of Disbursements

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	123.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	123.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	32000.00	170250.00
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))..	32000.00	170373.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32000.00	170373.00

DETAILED SUMMARY PAGE
of Disbursements

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)	20856.74	73333.46
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20856.74	73333.46
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	123.00
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	123.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 37
(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)
Calvin L. Anderson

Mailing Address 1655 Carr Ave.

City State Zip Code
Memphis TN 38104

FEC ID number of contributing federal political committee. C

Name of Employer: Blue Cross Blue Shield Of Tenn
Occupation: **Manager**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2008
Transaction ID: 80604.C117299

Amount of Each Receipt this Period 100.00

Receipt

Payroll Deduction: (50.00- /Pay Period)

B. Full Name (Last, First, Middle Initial)
Mark W. Banks

Mailing Address 4634 Edgebrook Pl.

City State Zip Code
Edin MN 55424

FEC ID number of contributing federal political committee. C

Name of Employer: BCBS of Minnesota
Occupation: **Health Insurer**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 06 / 02 / 2008
Transaction ID: 80604.C117330

Amount of Each Receipt this Period 120.00

Receipt

Payroll Deduction: (40.00- /Pay Period)

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

Mailing Address 1310 G St NW

City State Zip Code
Washington DC 20005-3000

FEC ID number of contributing federal political committee. C

Name of Employer: Blue Cross & Blue Shield Assoc
Occupation: **Manager**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 13 / 2008
Transaction ID: 80703.C117924

Amount of Each Receipt this Period 50.00

Receipt

Payroll Deduction: (25.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional) 270.00

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 / 37
	<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) Christopher Booth	Date of Receipt MM / DD / YYYY 06 / 02 / 2008
	Mailing Address 10 Northstone Rise	Transaction ID: 80604.C117358
	City State Zip Code Pittsford NY 14534-3064	Amount of Each Receipt this Period 2667.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Excellus BlueCross BlueShield EVP & CAO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2667.00	

B.	Full Name (Last, First, Middle Initial) Dan Bradfield	Date of Receipt MM / DD / YYYY 06 / 13 / 2008
	Mailing Address 18405 Bishopstone Court	Transaction ID: 80703.C117861
	City State Zip Code Montgomery Village MD 20886	Amount of Each Receipt this Period 44.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Bluepac Health Insurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 286.00	Payroll Deduction: (22.00- /Pay Period)

C.	Full Name (Last, First, Middle Initial) Jerry W. Bradshaw	Date of Receipt MM / DD / YYYY 06 / 02 / 2008
	Mailing Address 1310 G Street, N.w.	Transaction ID: 80604.C117305
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Bc/bs Of Arkansas Health Insurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	Payroll Deduction: (40.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	2791.00
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 8 / 37
(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

<p>A. Full Name (Last, First, Middle Initial) William A. Breskin</p> <p>Mailing Address 1703 Hunts End Ct.</p> <p>City State Zip Code Vienna VA 22182</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Blue Cross/blue Shield As- socio</p> <p>Occupation Chief Wash Counsel</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 520.00</p>	<p>Date of Receipt 06 / 13 / 2008</p> <p>Transaction ID: 80703.C117862</p> <p>Amount of Each Receipt this Period 80.00</p> <p>Receipt</p> <p>Payroll Deduction: (40.00- /Pay Period)</p>
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<p>B. Full Name (Last, First, Middle Initial) Paul F. Brown</p> <p>Mailing Address 406 16th Street</p> <p>City State Zip Code Wilmette IL 60091</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Blue Cross Blue Shield As- socio</p> <p>Occupation Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 650.00</p>	<p>Date of Receipt 06 / 13 / 2008</p> <p>Transaction ID: 80703.C117916</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Receipt</p> <p>Payroll Deduction: (50.00- /Pay Period)</p>
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<p>C. Full Name (Last, First, Middle Initial) Paul J. Canchester</p> <p>Mailing Address 902 Marion Avenue</p> <p>City State Zip Code Highland Park IL 60035</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Blue Cross Blue Shield As- socio</p> <p>Occupation Managing Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 560.00</p>	<p>Date of Receipt 06 / 13 / 2008</p> <p>Transaction ID: 80703.C117866</p> <p>Amount of Each Receipt this Period 90.00</p> <p>Receipt</p> <p>Payroll Deduction: (45.00- /Pay Period)</p>
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SUBTOTAL of Receipts This Page (optional)	270.00
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 9 / 37
(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

<p>A. Full Name (Last, First, Middle Initial) John Cerisano</p> <p>Mailing Address 1310 G Street, N.w.</p> <p>City State Zip Code Washington DC 20005</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Blue Cross/blue Shield As- socio Occupation Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 390.00</p>	<p>Date of Receipt 06 / 13 / 2008</p> <p>Transaction ID: 80703.C117867</p> <p>Amount of Each Receipt this Period 60.00</p> <p>Receipt</p> <p>Payroll Deduction: (30.00- /Pay Period)</p>
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<p>B. Full Name (Last, First, Middle Initial) William James Colbourne</p> <p>Mailing Address 551 Woodvale Ave</p> <p>City State Zip Code Deerfield IL 60015-2364</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Blue Cross/blue Shield As- socio Occupation Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 845.00</p>	<p>Date of Receipt 06 / 13 / 2008</p> <p>Transaction ID: 80703.C117868</p> <p>Amount of Each Receipt this Period 130.00</p> <p>Receipt</p> <p>Payroll Deduction: (65.00- /Pay Period)</p>
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<p>C. Full Name (Last, First, Middle Initial) Jay Michael Cook</p> <p>Mailing Address 1310 G Street, Nw</p> <p>City State Zip Code Washington DC 20005</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Bc/bs Association Occupation Health Insurer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 325.00</p>	<p>Date of Receipt 06 / 13 / 2008</p> <p>Transaction ID: 80703.C117869</p> <p>Amount of Each Receipt this Period 50.00</p> <p>Receipt</p> <p>Payroll Deduction: (25.00- /Pay Period)</p>
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SUBTOTAL of Receipts This Page (optional)	240.00
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 10 / 37
	<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) Steven Coulter	Date of Receipt MM / DD / YYYY 06 / 02 / 2008
	Mailing Address 1310 G Street, Nw	Transaction ID: 80604.C117296
	City State Zip Code Washington DC 37402	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Bluecross Blueshield Of Tennes Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	Payroll Deduction: (50.00- /Pay Period)

B.	Full Name (Last, First, Middle Initial) Karen Cox	Date of Receipt MM / DD / YYYY 06 / 13 / 2008
	Mailing Address 225 N Michigan Ave	Transaction ID: 80703.C117932
	City State Zip Code Chicago IL 60601-6014	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Bc/bS Association Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	Payroll Deduction: (20.00- /Pay Period)

C.	Full Name (Last, First, Middle Initial) Kathy Didawick	Date of Receipt MM / DD / YYYY 06 / 13 / 2008
	Mailing Address 3015 S 7th Street	Transaction ID: 80703.C117871
	City State Zip Code Arlington DC 22204	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 Treasurer, Blue Pac Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	Payroll Deduction: (50.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	240.00
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 11 / 37

(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) Charles Dubois Mailing Address 18076 Gladstone Blvd N City State Zip Code Osseo MN 55311-1104 FEC ID number of contributing federal political committee. C Name of Employer Occupation BCBS of Minnesota Vp Internal Audit Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 8 Transaction ID: 80604.C117344 Amount of Each Receipt this Period 60.00 Receipt Payroll Deduction: (20.00- /Pay Period)
B.	Full Name (Last, First, Middle Initial) Emil (Zeke) Duda Mailing Address 23 Old Westfall Drive City State Zip Code Rochester NY 14625 FEC ID number of contributing federal political committee. C Name of Employer Occupation Excellus BlueCross BlueShield Sr. EVP & CFO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2667.00	Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 8 Transaction ID: 80604.C117357 Amount of Each Receipt this Period 2667.00 Receipt
C.	Full Name (Last, First, Middle Initial) Jim Eppel Mailing Address 4118 Sunnyside Rd City State Zip Code Minneapolis MN 55424-1214 FEC ID number of contributing federal political committee. C Name of Employer Occupation BCBS of Minnesota VP Network Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 8 Transaction ID: 80604.C117342 Amount of Each Receipt this Period 75.00 Receipt Payroll Deduction: (25.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	2802.00
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 / 37
(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
							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

Mailing Address 1310 G Street, N.w.

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation
Blue Cross/blue Shield As- Exec. Director
socia

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 80703.C117872

Amount of Each Receipt this Period

100.00

Receipt

Payroll Deduction: (50.00-
/Pay Period)

B.

Full Name (Last, First, Middle Initial)
Garry M. Ewing

Mailing Address 3453 N. 13th Street

City State Zip Code
Arlington VA 22201

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

Name of Employer Occupation
Blue Cross Blue Shield As- Director, Leg & Reg Affairs
socia

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 80703.C117874

Amount of Each Receipt this Period

50.00

Receipt

Payroll Deduction: (25.00-
/Pay Period)

C.

Full Name (Last, First, Middle Initial)
Alissa T. Fox

Mailing Address 1310 G Street, N.w.

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation
Blue Cross/blue Shield As- Exec. Director
socia

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 845.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 80703.C117936

Amount of Each Receipt this Period

130.00

Receipt

Payroll Deduction: (65.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

280.00

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 13 / 37
(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
							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

Mailing Address 17109 Flatwood Dr.

City State Zip Code
Rockville MD 20855

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

Name of Employer: Blue Cross Blue Shield As-socia
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt: 06 / 13 / 2008
Transaction ID: 80703.C117876
Amount of Each Receipt this Period: 100.00
Receipt
Payroll Deduction: (50.00- /Pay Period)

B. Full Name (Last, First, Middle Initial)
Joan M. Gardner

Mailing Address 1310 G Street, N.w.

City State Zip Code
Washington DC 20005

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

Name of Employer: Blue Cross/blue Shield As-socia
Occupation: Ex. Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.00

Date of Receipt: 06 / 13 / 2008
Transaction ID: 80703.C117877
Amount of Each Receipt this Period: 44.00
Receipt
Payroll Deduction: (22.00- /Pay Period)

C. Full Name (Last, First, Middle Initial)
Vicky B. Gregg

Mailing Address 1310 G Street N.w.

City State Zip Code
Washington DC 20005

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

Name of Employer: Bc/bs Of Tennessee
Occupation: Health Insurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt: 06 / 02 / 2008
Transaction ID: 80604.C117291
Amount of Each Receipt this Period: 150.00
Receipt
Payroll Deduction: (75.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional) ▶ **294.00**

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 14 / 37
	<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) Michael Hamerlik	Date of Receipt MM / DD / YYYY 06 / 11 / 2008
	Mailing Address 1310 G Street, N.w.	Transaction ID: 80703.C117392
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (50.00- /Pay Period)
Name of Employer Noridian-bc/bs Of North Dakota	Occupation Health Insurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Justine Handelman	Date of Receipt MM / DD / YYYY 06 / 13 / 2008
	Mailing Address 3304 Ferndale Avenue	Transaction ID: 80703.C117880
	City State Zip Code Kensington MD 20815	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (25.00- /Pay Period)
Name of Employer Blue Cross Blue Shield As- socio	Occupation Executive Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

C.	Full Name (Last, First, Middle Initial) Joan Harp	Date of Receipt MM / DD / YYYY 06 / 02 / 2008
	Mailing Address 1310 G Street NW	Transaction ID: 80604.C117259
	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 Payroll Deduction: (50.00- /Pay Period)
Name of Employer BCBS of Tennessee	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	200.00
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 15 / 37
	<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) Ron Harr	Date of Receipt MM / DD / YYYY 06 / 02 / 2008
	Mailing Address 1310 G Street N.w.	Transaction ID: 80604.C117288
	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 Payroll Deduction: (50.00- /Pay Period)
Name of Employer Bc/bc Of Tennessee	Occupation Health Insurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Philip Hays	Date of Receipt MM / DD / YYYY 06 / 13 / 2008
	Mailing Address 1310 G Street, NW	Transaction ID: 80703.C117918
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 70.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (35.00- /Pay Period)
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 ▼ 455.00	

C.	Full Name (Last, First, Middle Initial) William Andrew Hensley	Date of Receipt MM / DD / YYYY 06 / 13 / 2008
	Mailing Address 1310 G Street, N.w.	Transaction ID: 80703.C117884
	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 Payroll Deduction: (50.00- /Pay Period)
Name of Employer Blue Cross/blue Shield As- soca	Occupation Vp	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	270.00
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 16 / 37
(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)
 Robert G. Iadicicco
 Mailing Address 1310 G Street, Nw
 City State Zip Code
 Washington DC 20005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bc/bs Association Occupation Health Insurer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00
 Date of Receipt 06 / 13 / 2008
Transaction ID: 80703.C117885
 Amount of Each Receipt this Period 50.00
 Receipt
 Payroll Deduction: (25.00- /Pay Period)

B. Full Name (Last, First, Middle Initial)
 John Michael Joyce, Jr.
 Mailing Address 1310 G Street, N.w.
 City State Zip Code
 Washington DC 20005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Cross/blue Shield As- socia Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00
 Date of Receipt 06 / 13 / 2008
Transaction ID: 80703.C117887
 Amount of Each Receipt this Period 60.00
 Receipt
 Payroll Deduction: (30.00- /Pay Period)

C. Full Name (Last, First, Middle Initial)
 Edward Kane
 Mailing Address 1310 G St NW
 City State Zip Code
 Washington DC 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Cross & Blue Shield Assoc Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00
 Date of Receipt 06 / 13 / 2008
Transaction ID: 80703.C117927
 Amount of Each Receipt this Period 50.00
 Receipt
 Payroll Deduction: (25.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional) ► **160.00**
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 17 / 37
(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)
 Peter Kelly
 Mailing Address 1316 Davis
 City State Zip Code
 Evanston IL 60201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Bcbs Association Occupation: Chief Employee Benefits
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00
 Date of Receipt: 06 / 13 / 2008
Transaction ID: 80703.C117864
 Amount of Each Receipt this Period: 80.00
 Receipt
 Payroll Deduction: (40.00- /Pay Period)

B. Full Name (Last, First, Middle Initial)
 David Klein
 Mailing Address 62 Meadow Cove Road
 City State Zip Code
 Pittsford NY 14534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Excellus BlueCross BlueShield
 Occupation: President & Ceo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00
 Date of Receipt: 06 / 02 / 2008
Transaction ID: 80604.C117356
 Amount of Each Receipt this Period: 3000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
 Allan M. Korn
 Mailing Address 1310 G Street, N.w.
 City State Zip Code
 Washington DC 20005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Blue Cross/blue Shield As-socia
 Occupation: Chief Medical Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 845.00
 Date of Receipt: 06 / 13 / 2008
Transaction ID: 80703.C117889
 Amount of Each Receipt this Period: 130.00
 Receipt
 Payroll Deduction: (65.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional) ► **3210.00**
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 18 / 37
(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)
Donald W. Lawhorn

Mailing Address 1310 G Street N.w.

City Washington State DC Zip Code 20005

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

Name of Employer Bc/bc Of Tennessee Occupation Health Insurer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2008

Transaction ID: 80604.C117236

Amount of Each Receipt this Period 100.00

Receipt

Payroll Deduction: (50.00- /Pay Period)

B. Full Name (Last, First, Middle Initial)
Mary N. Lehnard

Mailing Address 4601 Rodman Street, NW

City Washington State DC Zip Code 20016

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

Name of Employer Blue Cross Blue Shield As- sn. Occupation Senior Vp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1495.00

Date of Receipt 06 / 13 / 2008

Transaction ID: 80703.C117914

Amount of Each Receipt this Period 230.00

Receipt

Payroll Deduction: (115.0- 0/Pay Period)

C. Full Name (Last, First, Middle Initial)
Thomas P. Leibensperger, Jr.

Mailing Address 5275 Bradgen Court

City Springfield State VA Zip Code 22151

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

Name of Employer Blue Cross Blue Shield As- sn. Occupation Manager, Grassroots & Advoc Pr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 13 / 2008

Transaction ID: 80703.C117892

Amount of Each Receipt this Period 50.00

Receipt

Payroll Deduction: (25.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional) ► 380.00

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 19 / 37

(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)
Dana G Lein

Mailing Address 14371 Fridley Way

City State Zip Code
Saint Paul MN 55124-5085

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

Name of Employer Occupation
BCBS of Minnesota VP Process & Performance

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 2 / 2 0 0 8

Transaction ID: 80604.C117347

Amount of Each Receipt this Period
60.00

Receipt
Payroll Deduction: (20.00-
/Pay Period)

B.

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

Mailing Address 834 Sund Drive

City State Zip Code
Northbrook IL 60062

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

Name of Employer Occupation
Blue Cross Blue Shield As- Managing Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 455.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 80703.C117893

Amount of Each Receipt this Period
70.00

Receipt
Payroll Deduction: (35.00-
/Pay Period)

C.

Full Name (Last, First, Middle Initial)
Scott B Lynch

Mailing Address 22966 Forest Ridge Dr

City State Zip Code
Lakeville MN 55044-8006

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

Name of Employer Occupation
BCBS of Minnesota SVP, Chief Legal Officer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 2 / 2 0 0 8

Transaction ID: 80604.C117348

Amount of Each Receipt this Period
60.00

Receipt
Payroll Deduction: (20.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional) ▶

190.00

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 20 / 37
	<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) Nancy F. Nelson	Date of Receipt MM / DD / YYYY 06 / 02 / 2008
	Mailing Address 1781 Tamberwood Tr.	Transaction ID: 80604.C117336
	City State Zip Code Woodbury MN 55125	Amount of Each Receipt this Period 54.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer: Bc/bc Of Minnesota Occupation: Health Insurer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 216.00	Payroll Deduction: (18.00- /Pay Period)

B.	Full Name (Last, First, Middle Initial) William O'Loughlin	Date of Receipt MM / DD / YYYY 06 / 13 / 2008
	Mailing Address 1310 G St NW	Transaction ID: 80703.C117933
	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: Blue Cross Blue Shield As-soc. Occupation: Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	Payroll Deduction: (50.00- /Pay Period)

C.	Full Name (Last, First, Middle Initial) Robert Ormsby	Date of Receipt MM / DD / YYYY 06 / 13 / 2008
	Mailing Address 1310 G Street, Nw 12th Floor	Transaction ID: 80703.C117897
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer: Blue Cross Blue Shield As-socia Occupation: Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00	Payroll Deduction: (30.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	214.00
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 21 / 37
	<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) Doug Porter	Date of Receipt MM / DD / YYYY 06 / 13 / 2008
	Mailing Address 1310 G St NW Fl 12	Transaction ID: 80703.C117935
	City State Zip Code Washington DC 20005-3004	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 Assoc Occupation: Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 650.00	Payroll Deduction: (50.00- /Pay Period)

B.	Full Name (Last, First, Middle Initial) Scott P. Serota	Date of Receipt MM / DD / YYYY 06 / 13 / 2008
	Mailing Address 1310 G Street, NW	Transaction ID: 80703.C117900
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 384.60
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer: Blue Cross Blue Shield Assn. Occupation: Ceo Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 2499.90	Payroll Deduction: (192.30- /Pay Period)

C.	Full Name (Last, First, Middle Initial) Terence K. Shea	Date of Receipt MM / DD / YYYY 06 / 02 / 2008
	Mailing Address 1310 G Street, Nw	Transaction ID: 80604.C117297
	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: Bluecross Blueshield Of Tennes Occupation: Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date: 300.00	Payroll Deduction: (50.00- /Pay Period)

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: PAGE 22 / 37
(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)
Robert L. Shoptaw

Mailing Address 21 River Ridge Circle

City State Zip Code
Little Rock AR 72227

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

Name of Employer Bc/bs Of Arkansas Occupation Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt: 06 / 02 / 2008

Transaction ID: 80604.C117319

Amount of Each Receipt this Period: 140.00

Receipt

Payroll Deduction: (70.00- /Pay Period)

B.

Full Name (Last, First, Middle Initial)
Jana L. Skewes

Mailing Address 1310 G Street, NW

City State Zip Code
Washington DC 20005

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

Name of Employer BCBS of Tennessee Occupation Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 02 / 2008

Transaction ID: 80604.C117302

Amount of Each Receipt this Period: 100.00

Receipt

Payroll Deduction: (50.00- /Pay Period)

C.

Full Name (Last, First, Middle Initial)
David Spalding

Mailing Address 2400 Shadow Creek

City State Zip Code
Saint Paul MN 55125

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

Name of Employer BCBS of Minnesota Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 02 / 2008

Transaction ID: 80604.C117340

Amount of Each Receipt this Period: 75.00

Receipt

Payroll Deduction: (25.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional) ► **315.00**

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 23 / 37
(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
							17

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

A.

Full Name (Last, First, Middle Initial)
Joyce M. Sterk

Mailing Address 4505 W. 101st Place

City State Zip Code
Oak Lawn IL 60453

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

Name of Employer: Blue Cross Blue Shield Association
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 06 / 13 / 2008
Transaction ID: 80703.C117902
Amount of Each Receipt this Period: 50.00
Receipt
Payroll Deduction: (25.00- /Pay Period)

B.

Full Name (Last, First, Middle Initial)
Kathryn M. Sullivan

Mailing Address 530 N. Lake Shore Drive #2309

City State Zip Code
Chicago IL 60611

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

Name of Employer: Bcbs Association
Occupation: SVP/CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 845.00

Date of Receipt: 06 / 13 / 2008
Transaction ID: 80703.C117910
Amount of Each Receipt this Period: 130.00
Receipt
Payroll Deduction: (65.00- /Pay Period)

C.

Full Name (Last, First, Middle Initial)
Dean S. Todaro

Mailing Address 1310 G Street, N.w.

City State Zip Code
Washington DC 20005

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

Name of Employer: Blue Cross/blue Shield Association
Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 06 / 13 / 2008
Transaction ID: 80703.C117904
Amount of Each Receipt this Period: 40.00
Receipt
Payroll Deduction: (20.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional) ► 220.00

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 24 / 37
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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)
James B. Trimble

Mailing Address 1310 G Street N.w.

City Washington State DC Zip Code 20005

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

Name of Employer Blue Cross/blue Shield As-socia Occupation Manager, Congressional Communi

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 560.00

Date of Receipt 06 / 13 / 2008

Transaction ID: 80703.C117905

Amount of Each Receipt this Period 90.00

Receipt

Payroll Deduction: (45.00- /Pay Period)

B.

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

Mailing Address 2122 Sterling Rose Lane

City Fargo State ND Zip Code 58104

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

Name of Employer Noridian-bc/bs Of North Dakota Occupation President & Ceo

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 11 / 2008

Transaction ID: 80703.C117410

Amount of Each Receipt this Period 100.00

Receipt

Payroll Deduction: (100.0- 0/Pay Period)

C.

Full Name (Last, First, Middle Initial)
Paul Von Ebers

Mailing Address 26 Thomas Grv

City Pittsford State NY Zip Code 14534-3066

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

Name of Employer Excellus BlueCross BlueSh-ield Occupation Evp/coo

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2667.00

Date of Receipt 06 / 02 / 2008

Transaction ID: 80604.C117359

Amount of Each Receipt this Period 2667.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **2857.00**

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 25 / 37

(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

<p>A. Full Name (Last, First, Middle Initial) Tim Voortman</p> <p>Mailing Address 225 N Michigan Ave</p> <p>City State Zip Code Chicago IL 60601-6014</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Blue Cross & Blue Shield Assoc</p> <p>Occupation Ex. Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 455.00</p>	<p>Date of Receipt MM / DD / YYYY 06 / 13 / 2008</p> <p>Transaction ID: 80703.C117923</p> <p>Amount of Each Receipt this Period 70.00</p> <p>Receipt</p> <p>Payroll Deduction: (35.00- /Pay Period)</p>
<p>B. Full Name (Last, First, Middle Initial) Lois Wattman</p> <p>Mailing Address 1310 G Street, NW 12th Floor</p> <p>City State Zip Code Washington DC 20005</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer BCBS of Minnesota</p> <p>Occupation Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 360.00</p>	<p>Date of Receipt MM / DD / YYYY 06 / 11 / 2008</p> <p>Transaction ID: 80703.C117362</p> <p>Amount of Each Receipt this Period 60.00</p> <p>Receipt</p> <p>Payroll Deduction: (30.00- /Pay Period)</p>
<p>C. Full Name (Last, First, Middle Initial) Paul M. White</p> <p>Mailing Address 1310 G Street, N.w.</p> <p>City State Zip Code Washington DC 20005</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Bc/bs Of Arkansas</p> <p>Occupation Health Insurer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 260.00</p>	<p>Date of Receipt MM / DD / YYYY 06 / 02 / 2008</p> <p>Transaction ID: 80604.C117324</p> <p>Amount of Each Receipt this Period 80.00</p> <p>Receipt</p> <p>Payroll Deduction: (40.00- /Pay Period)</p>

SUBTOTAL of Receipts This Page (optional) ▶

210.00

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 26 / 37

(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)
Connie Woodard

Mailing Address 1310 G Street, Nw

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation
Blue Cross Blue Shield Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 80703.C117907

Amount of Each Receipt this Period

50.00

Receipt

Payroll Deduction: (25.00- /Pay Period)

B.

Full Name (Last, First, Middle Initial)
Robert E Worthington

Mailing Address 1310 G Street NW

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation
BCBS of Tennessee Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 2 / 2 0 0 8

Transaction ID: 80604.C117269

Amount of Each Receipt this Period

100.00

Receipt

Payroll Deduction: (50.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

16147.60

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

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

FOR LINE NUMBER: PAGE 27 / 37
(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)
 Blue Cross & Blue Shield 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 ▼ 4104.00
 Date of Receipt M M / D D / Y Y Y Y Y
 0 6 / 2 0 / 2 0 0 8
Transaction ID: 80703.C117975
 Amount of Each Receipt this Period 684.00
 Transfers From Affil./Aut-h.

B. Full Name (Last, First, Middle Initial)
 PAC of Pennsylvanias Blue Cross Plan
 Mailing Address P.O. Box 60710
 City State Zip Code
 Harrisburg PA 17106-0710
 FEC ID number of contributing federal political committee. **C** C00270967
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00
 Date of Receipt M M / D D / Y Y Y Y Y
 0 6 / 1 1 / 2 0 0 8
Transaction ID: 80703.C117382
 Amount of Each Receipt this Period 2000.00
 Transfers From Affil./Aut-h.

C. Full Name (Last, First, Middle Initial)
 PAC of Pennsylvanias Blue Cross Plan
 Mailing Address P.O. Box 60710
 City State Zip Code
 Harrisburg PA 17106-0710
 FEC ID number of contributing federal political committee. **C** C00270967
 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 6 / 2 0 / 2 0 0 8
Transaction ID: 80703.C117976
 Amount of Each Receipt this Period 1000.00
 Transfers From Affil./Aut-h.

SUBTOTAL of Receipts This Page (optional) ► 3684.00
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 28 / 37

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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) Highmark Health PAC		Date of Receipt
	Mailing Address 1800 Center Street		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Camp Hill	PA	17089-0089
	FEC ID number of contributing federal political committee.		Transaction ID: 80703.C118186
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For:		Aggregate Year-to-Date	<input type="text" value="2000.00"/>
<input type="checkbox"/> Primary <input type="checkbox"/> General			Transfers From Affil./Aut-h.
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="4000.00"/>	

B.	Full Name (Last, First, Middle Initial) Blue Shield of California		Date of Receipt
	Mailing Address 50 Beale Street		<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Francisco	CA	94105-
	FEC ID number of contributing federal political committee.		Transaction ID: 80703.C117381
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For:		Aggregate Year-to-Date	<input type="text" value="12500.00"/>
<input type="checkbox"/> Primary <input type="checkbox"/> General			Transfers From Affil./Aut-h.
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="12500.00"/>	

C.	Full Name (Last, First, Middle Initial) Blue Cross & Blues Shield of Illinois		Date of Receipt
	Mailing Address 300 E. Randolph Drive Suite 1500		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Chicago	IL	60601-
	FEC ID number of contributing federal political committee.		Transaction ID: 80703.C118187
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For:		Aggregate Year-to-Date	<input type="text" value="4543.18"/>
<input type="checkbox"/> Primary <input type="checkbox"/> General			Transfers From Affil./Aut-h.
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="9908.60"/>	

SUBTOTAL of Receipts This Page (optional) ▶

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 29 / 37	
	(check only one)			
<input 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 checked="" 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) Comerica Bank		Date of Receipt
	Mailing Address P.O. Box 75000		<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Detroit	MI	48375-2250
	FEC ID number of contributing federal political committee.		Transaction ID: 80604.C117224
	<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		Occupation	<input type="text" value="34.42"/>
Receipt For:		Aggregate Year-to-Date ▼	Interest Received
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="253.42"/>	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="34.42"/>
TOTAL This Period (last page this line number only)	<input type="text" value="34.42"/>

**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 30 / 37

<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) Solidarity PAC	Transaction ID: 80611.E1999 Date of Disbursement 06 / 11 / 2008
	Mailing Address 550 Kearny St Ste 1010	
	City San Francisco State CA Zip Code 94108-2570	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name SOLIDARITY PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ANNUAL/OTHER	DIRECT CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) Citizens for Altmire	Transaction ID: 80611.E2000 Date of Disbursement 06 / 11 / 2008
	Mailing Address 499 South Capitol Street SE Suite 404	
	City Washington State DC Zip Code 20003-	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name JASON ALTMIRE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	DIRECT CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) Berry for Congress	Transaction ID: 80703.E2013 Date of Disbursement 06 / 23 / 2008
	Mailing Address 236 Massachusetts Avenue, NE Suite 508	
	City Washington State DC Zip Code 20002-	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name MARION BERRY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 01 Disbursement For: 2008 <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

<p>A. Full Name (Last, First, Middle Initial) Marsha Blackburn for Congress, Inc.</p> <p>Mailing Address 4916 Thoroughbread lane suite 4916</p> <p>City Brentwood State TN Zip Code 37027-</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name MARSHA MRS. BLACKBURN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 07</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80703.E2022 Date of Disbursement 06 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>DIRECT CONTRIBUTION</p>
<p>B. Full Name (Last, First, Middle Initial) Marsha Blackburn for Congress, Inc.</p> <p>Mailing Address 4916 Thoroughbread lane suite 4916</p> <p>City Brentwood State TN Zip Code 37027-</p> <p>Purpose of Disbursement : STOP PAYMENT</p> <p>Candidate Name MARSHA MRS. BLACKBURN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 07</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80703.E2023 Date of Disbursement 06 / 25 / 2008</p> <p>Amount of Each Disbursement this Period -1000.00</p> <p>: STOP PAYMENT</p>
<p>C. 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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80611.E2004 Date of Disbursement 06 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>DIRECT CONTRIBUTION</p>

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)

<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) ERIC PAC</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 Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: ANNUAL/OTHER</p>	<p>Transaction ID: 80703.E2011 Date of Disbursement 06 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>DIRECT CONTRIBUTION</p>
<p>B. Full Name (Last, First, Middle Initial) Christensen Congressional Campaign</p> <p>Mailing Address Sunny Isle</p> <p>City St. Croix State VI Zip Code 00823-</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name DONNA M CHRISTENSEN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: VI District: 00</p>	<p>Transaction ID: 80703.E2018 Date of Disbursement 06 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>DIRECT CONTRIBUTION</p>
<p>C. Full Name (Last, First, Middle Initial) Norm Coleman For U.s. Senate</p> <p>Mailing Address 680 Transfer Rd</p> <p>City Saint Paul State MN Zip Code 55114-1402</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name NORM COLEMAN</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MN District: 00</p>	<p>Transaction ID: 80611.E2002 Date of Disbursement 06 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>DIRECT CONTRIBUTION</p>

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

<p>A. Full Name (Last, First, Middle Initial) Texans for Senator John Cornyn Inc.</p> <p>Mailing Address 201 Massachusetts Ave NE Ste C3</p> <p>City Washington State DC Zip Code 20002-4988</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name JOHN CORNYN</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80703.E2010 Date of Disbursement 06 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>DIRECT CONTRIBUTION</p>
<p>B. Full Name (Last, First, Middle Initial) Geoff Davis for Congress</p> <p>Mailing Address 3161 Dixie Hwy Ste F</p> <p>City Erlanger State KY Zip Code 41018-1841</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name GEOFFREY C DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80611.E2005 Date of Disbursement 06 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>DIRECT CONTRIBUTION</p>
<p>C. Full Name (Last, First, Middle Initial) Friends Of Sam Johnson</p> <p>Mailing Address P.o. Box 860096</p> <p>City Plano State TX Zip Code 75086-</p> <p>Purpose of Disbursement DIRECT CONTRIBUTION</p> <p>Candidate Name SAMUEL R JOHNSON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 03</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80611.E2007 Date of Disbursement 06 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>DIRECT CONTRIBUTION</p>

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) Committee for Preservation of Capitalism Mailing Address P.O. Box 65314 City Washington State DC Zip Code 20036- Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name COMMITTEE FOR THE PRESERVATION OF CAPITALISM (CPC), THE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: ANNUAL/OTHER	Transaction ID: 80703.E2016 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 8
	Amount of Each Disbursement this Period 2500.00 Category/Type DIRECT CONTRIBUTION

B. Full Name (Last, First, Middle Initial) Earl Pomeroy for Congress Mailing Address P.O. Box 75214 City Washington State DC Zip Code 20013- Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name EARL RALPH POMEROY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: ND District: 00	Transaction ID: 80703.E2012 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 8
	Amount of Each Disbursement this Period 2500.00 Category/Type DIRECT CONTRIBUTION

C. Full Name (Last, First, Middle Initial) Jon Porter for Congress Mailing Address 1006 Pendleton Street City Alexandria State VA Zip Code 22314- Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name JON C PORTER, SR Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NV District: 03	Transaction ID: 80703.E2020 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00 Category/Type DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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) Pat Roberts for Senate Mailing Address P.O. Box 433 City State Zip Code Great Bend KS 67530- Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name PAT ROBERTS Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KS District: 00	Transaction ID: 80703.E2015 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 8	
		Amount of Each Disbursement this Period 1000.00	
		DIRECT CONTRIBUTION	
B.	Full Name (Last, First, Middle Initial) Mike Rogers for Congress Mailing Address 123 East 13th Street City State Zip Code Anniston AL 36201- Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name MICHAEL ROGERS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AL District: 03	Transaction ID: 80703.E2017 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 8	
		Amount of Each Disbursement this Period 1000.00	
		DIRECT CONTRIBUTION	
C.	Full Name (Last, First, Middle Initial) Lucille Roybal-Allard for Congress Mailing Address P.O. Box 582 City State Zip Code Kensington MD 20895- Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name LUCILLE ROYBAL-ALLARD Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 34	Transaction ID: 80611.E2006 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 0 8	
		Amount of Each Disbursement this Period 1000.00	
		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)

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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) Rocky Mountain PAC <hr/> Mailing Address 422 C Street, NE Lower Level <hr/> City Washington State DC Zip Code 20002- <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name ROCKY MOUNTAIN PAC <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ ANNUAL/OTHER	Transaction ID: 80611.E2008 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 3000.00 <hr/> DIRECT CONTRIBUTION
	Category/ Type
B. Full Name (Last, First, Middle Initial) Bob Schaffer for US Senate <hr/> Mailing Address PO Box 10213 <hr/> City Denver State CO Zip Code 80250- <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80703.E2014 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 2000.00 <hr/> DIRECT CONTRIBUTION
	Category/ Type
C. Full Name (Last, First, Middle Initial) Adam Smith for Congress <hr/> Mailing Address P.O. Box 23626 <hr/> City Federal Way State WA Zip Code 98093-0626 <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name D ADAM SMITH <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 09 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80611.E2003 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 1000.00 <hr/> DIRECT CONTRIBUTION
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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) John Spratt for Congress	Transaction ID: 80703.E2021 Date of Disbursement 06 / 25 / 2008
	Mailing Address PO Box 636	
	City Annandale State VA Zip Code 22003-0636	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name JOHN M SPRATT, JR Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 05	Category/Type DIRECT CONTRIBUTION
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) BlueDog PAC	Transaction ID: 80703.E2019 Date of Disbursement 06 / 23 / 2008
	Mailing Address 236 Massachusetts Ave., NE Suite 508	
	City Washington State DC Zip Code 20002-	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name BLUE DOG POLITICAL ACTION COMMITTEE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type DIRECT CONTRIBUTION
	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ ANNUAL/OTHER	

C.	Full Name (Last, First, Middle Initial) Wicker for Senate	Transaction ID: 80611.E2001 Date of Disbursement 06 / 11 / 2008
	Mailing Address 104 Hume Ave	
	City Alexandria State VA Zip Code 22301-1015	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name WICKER FOR SENATE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type DIRECT CONTRIBUTION
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	32000.00