

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

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

FOR LINE NUMBER: PAGE 17 OF 44

(check only one)

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

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NAME OF COMMITTEE (In Full)

Capital BluePAC, The Political Action Committee of Capital BlueCross

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

A. Koken, M Diane, , ,

Mailing Address 1102 Oakmont Dr

City
Lancaster

State
PA

Zip Code
17601-5074

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Legal/Regulatory Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY
09 / 25 / 2019

Transaction ID : A02277A89341E4C419CC

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

B. Dolan, Robert, , ,

Mailing Address 701 E College Ave

City

Elizabethtown

State

PA

Zip Code

17022-2228

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Conrad Siegel Actuaries

Occupation (for Individual)

Director Emeritus

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY
09 / 25 / 2019

Transaction ID : AD0BFC68776814FA48E8

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

C. Vose, Courtney, , ,

Mailing Address 620 W. 170th St., Apt. 6B

City

New York

State

NY

Zip Code

10032-3531

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

New York Presbyterian Hospital

Occupation (for Individual)

Nurse Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY
10 / 01 / 2019

Transaction ID : AE03FFCEE3AE84BF6991

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

7500.00