FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Guidewell Mutual Holding Corporation Political Action Committee (Guidewell PAC) 4800 Deerwood Campus Parkway ADDRESS (number and street) DC3-4 (Check if address is changed) Jacksonville 32246 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address craig.provenzano@bcbsfl.com is changed) Optional Second E-Mail Address suzanne.horne@bcbsfl.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00161141 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Provenzano, Craig,, 05 10 2024 Signature of Treasurer Provenzano, Craig, , , Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FE	EC Form 1 (Revised 03/2022)	Page 2
5.	TYPE OF COMMITTEE:	
	Candidate Committee:	
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the ca information below.)	ndidate
	Name of Candidate	
	Candidate Party Affiliation Office Sought: House Senate President	State District
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
	Party Committee:	
	(d) This committee is a (National, State or subordinate) committee of the Republican, etc.) Party
	Political Action Committee (PAC):	
	(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	ganization is a:
	X Corporation Corporation w/o Capital Stock Labor Organ	ization
	Membership Organization Trade Association Cooperative	
	X In addition, this committee is a Lobbyist/Registrant PAC.	
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fur committee. (i.e., nonconnected committee)	nd or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	(g) This committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	Joint Fundraising Representative:	
	(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more committees/organizations, at least one of which is an authorized committee of a federal candidate.	ore political
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or monomorphisms committees/organizations, none of which is an authorized committee of a federal candidate.	ore political
	Committees Participating in Joint Fundraiser	
	1C	

Treasurer

	_			
I	FEC Form 1 (Revised 0)	2/2009)		Page 3
V	Vrite or Type Committee Name			raye 3
		Holding Corporation Political	Action Committee (G	uidewell PAC)
6.		ganization, Affiliated Committee, Joint Fu	•	•
	Guidewell Mutual Hol	ding Corporation		
	Mailing Address	4800 Deerwood Campus Parkway		
		DC3-4		
		Jacksonville	FL 32	246
		CITY ▲	STATE ▲	ZIP CODE ▲
	Relationship: X Connected	Organization Affiliated Organization	Joint Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Records: Identification books and records.	fy by name, address (phone number optiona	al) and position of the person in pos	ssession of committee
	Horne, Suz	anne, , ,		
	Full Name	4800 Deerwood Campus Parkway		
	Mailing Address			
		DC3-4		
		Jacksonville	FL 32	246
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	President		Telephone number 904	- <u>905</u> - <u>8720</u>
8.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the ssistant treasurer).	treasurer of the committee; and the	ne name and address of
	Full Name Provenzance of Treasurer	ı, Craig, , ,		
	Mailing Address	4800 Deerwood Campus Parkway		
		DC3-4		
		Jacksonville	FL 32	246
	Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲

904

Telephone number

905

0440

	FEC Form 1	(Revised 02/2009)		Page 4
	Full Name of			
	Designated Agent			
ı	Mailing Address			
_	Title or Position		STATE A	ZIP CODE ▲
	Title or Position		1 1 1	
١		Telephone number	er	
		Depositories: List all banks or other depositories in which the committee ses or maintains funds.	deposits funds, hole	ds accounts, rents
١	Name of Bank, D	epository, etc.		
		Bank of America		
N	Mailing Address	P.O. Box 25118		
			FL 33622-	5118
		CITY ▲ S	TATE A	ZIP CODE ▲
-	Name of Bank, [epository, etc.		
N	Mailing Address			
		CITY ▲ S	TATE ▲	ZIP CODE ▲

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ H98 'HC' 5 'F9 DCFH Z G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

This is being amended to remove Independence Blue Cross PAC (C00450056) as an affiliated committee

Form/Schedule: Transaction ID:

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		Participant:					
1.				FEC ID) number	C	<u> </u>
2.				FEC ID	number	С	
3.				FEC ID) number	C	
4.				 FEC ID) number	C	
ame of Any	Connected C	organization, A	ffiliated Committee, Joint	Fundraising Rep	resentative	e, or Lead	ership PAC Spon
LOUISIANA	HEALTH S	ERVICE & IN	DEMNITY COMPANY DE	BA BLUE CROS	S & BLUE	SHIELD (OF LOUISIANA F
		ı 5525 Reitz Av	vanua.				
Mailing A	ddress	5525 Reitz AV					
		Baton Rouge		, , , , , , , , ,	LA L	4080	9
Relations	Connected	Organization	CITY ▲ X Affiliated Committee ess (phone number – option	Joint Fundraising	STATE ▲ Representa	ative	ZIP CODE ▲ Leadership PAC S
[Connected	Organization	X Affiliated Committee			ative	
esignated Ag	Connected	Organization	X Affiliated Committee			ative	
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esignated Ag Full Name Mailing Add	Connected ent: Identify dress	Organization by name, addre	X Affiliated Committee	nal)		ative	
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l				FEC ID	number	C	
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4.				 FEC ID	number	С	
lame of A	ny Connected (Organization, Affili	ated Committee, Joint	Fundraising Rep	resentative	e, or Leadership PAC Sp	oons
BLUE C	ROSS AND B	LUE SHIELD OF	NEBRASKA PAC				
Mailin	g Address	7261 MERCY RC	DAD				
		PO BOX 3248					
		OMAHA			NE	68180	
			CITY A		STATE A	ZIP CODE A	<u> </u>
			Affiliated Committee (phone number – option	Joint Fundraising	Representa	Leadership PAC	
	Connected Agent: Identify		Affiliated Committee		Representa	Leadership PAC	
esignated Full Nar	Connected Agent: Identify		Affiliated Committee		Representa	Leadership PAC	
esignated Full Nar	Connected Agent: Identify me		Affiliated Committee		Representa	Leadership PAC	
esignated Full Nar	Connected Agent: Identify me		Affiliated Committee		Representa	Leadership PAC	
esignated Full Nar Mailing	Connected Agent: Identify me	by name, address	Affiliated Committee	nal)	Representa	Leadership PAC	

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1.		FEC ID number	C
2.			
3.		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
HORIZON HEALTH	CARE SERVICES, INCHORIZON BCBSNJ I	FEDERAL PAC INC).
1			
Mailing Address	3 PennPlz E		
	PP-11G		
	Newark	, , NJ	07105
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	d Organization X Affiliated Committee Joint by by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which	STATE A	ZIP CODE A
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h). Joint Fundraisi	ng Participant:		
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2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
HIGHMARK PAC O	I Organization, Affiliated Committee, Joint Fu F HIGHMARK INC.	ndraising Hepresentativ	e, or Leadership PAC Spon
Mailing Address	1800 Center Street		
	Camp Hill	PA	17089
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization X Affiliated Committee J fy by name, address (phone number – optional)	oint Fundraising Represent	Leadership FAC S
			Leadership PAC Sp
esignated Agent: Identi			Leadership FAC 5
esignated Agent: Identi			Leadership FAC 5
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h). Joint Fundrais i	ing Participant:		
1.		FEC ID number	С
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ame of Any Connecte	d Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
-	BLUE SHIELD OF KANSAS CITY FEDERA		· · · · · · · · · · · · · · · · · · ·
Mailing Address	2301 MAIN STREET		
	KANSAS CITY	MO	64108
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect	ed Organization X Affiliated Committee Joi	nt Fundraising Representa	ative Leadership PAC Sp
Connect		nt Fundraising Representa	Leadership PAC Sp
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(h). Joint Fundrais i	ing Farticipant.		
1.		FEC ID number	С
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3.		FEC ID number	С
4		FEC ID number	С
-	d Organization, Affiliated Committee, Joint Fun		e, or Leadership PAC Spons
BLUE CROSS AND	LUI		
Mailing Address	1133 SW TOPEKA BLVD		
	CC:855 - B3		
	TOPEKA	KS	66629
Deletienskie	CITY A	STATE ▲	ZIP CODE ▲
		int Fundraising Represent	ative Leadership PAC Spo
Connect	ed Organization X Affiliated Committee Jo	int Fundraising Represent	ative Leadership PAC Spo
Connect Designated Agent: Ident	ed Organization X Affiliated Committee Jo	int Fundraising Represent	ative Leadership PAC Spo
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundrais	ing Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
_	d Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
Mailing Address	232 S. CAPITOL		
Mailing Address	MC L10A		
	LANSING	MI	48933
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Full Name	<u> </u>		
Mailing Address			
		1 1 . 1	1
			1
	CITY A	STATE ▲	ZIP CODE ▲
TITLE OR POSITIO	N ▼ CITY ▲	1	ZIP CODE ▲
TITLE OR POSITIO	N ▼ CITY ▲	STATE ▲ Telephone Number	ZIP CODE A
	tories: List all banks or other depositories in whe	Telephone Number	s funds, holds accounts, rents
Banks or Other Deposit safety deposit boxes or r	tories: List all banks or other depositories in whe	Telephone Numberich the committee deposit	s funds, holds accounts, rents
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi	ng Farticipant.		
1.		FEC ID number	С
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ame of Any Connected	d Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
BLUE SHIELD OF C	ALIFORNIA		
Mailing Address	50 BEALE STREET17-C356		
	SAN FRANCISCO	CA	94105
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecto	ed Organization X Affiliated Committee Joinfy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
_	d Organization, Affiliated Committee, Joint		
CAPITAL BLUEPAC	C, THE POLITICAL ACTION COMMITTE	E OF CAPITAL BLUEC	ROSS
Mailing Address	PO BOX 60710		
	HARRISBURG	PA	17177
Relationship:	CITY ▲	STATE 4	ZIP CODE ▲
Designated Agent: Identi	fy by name, address (phone number - option	al)	
Full Name			
Full Name	<u> </u>		
Mailing Address	CITY A	STATE A	ZIP CODE A
Mailing Address TITLE OR POSITION	CITY A	STATE A Telephone Number	ZIP CODE A
Mailing Address TITLE OR POSITION		Telephone Number	
Mailing Address TITLE OR POSITION	ories: List all banks or other depositories in v	Telephone Number	
Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank,	ories: List all banks or other depositories in variations funds.	Telephone Number	sits funds, holds accounts, rents
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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected Blue Cross Blue Shi	l Organization, Affiliated Committee, Joint Fundellor Alabama	Iraising Representative	e, or Leadership PAC Spons
Mailing Address	2 North Jackson St.		
	Suite 202		
	Montgomery	AL	36104
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		nt Fundraising Representa	Leadership PAC Sp
Connecte	ed Organization X Affiliated Committee Joi	nt Fundraising Representa	ative Leadership PAC Sp
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4.		FEC ID number	C
Name of Any Connecte	d Organization, Affiliated Committee, Joint F	undraising Representative	e, or Leadership PAC Spons
CAREFIRST BLUE	CROSS BLUESHIELD ASSOCIATES' FEI	DERAL PAC	
Mailing Address	10455 MILL RUN CIRCLE		
	OWINGS MILL	MD	21117
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	ed Organization X Affiliated Committee	Joint Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Ident	ify by name, address (phone number – optiona	l)	
Full Name	ify by name, address (phone number – optiona	i)	
	ify by name, address (phone number – optiona	i)	
Full Name	ify by name, address (phone number – optiona	i)	
Full Name		i)	
Full Name	CITY A	STATE A	ZIP CODE A
Full Name _ _ Mailing Address TITLE OR POSITIO	CITY A		ZIP CODE A
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	ng Participant:		
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4.		FEC ID number	С
•	d Organization, Affiliated Committee, Joint Fun	• .	
HEALTHY GOVERNME	NT COMMITTEE-THE POLITICAL ACTION COMMIT	TEE OF BLUE CROSS &	BLUE SHIELD OF ARIZONA,
Mailing Address	P.O. BOX 13466		
	PHOENIX	AZ	85002
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Ident	ed Organization X Affiliated Committee Jo	int Fundraising Representa	
			Leadership PAC Sp
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esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of Bank,	fy by name, address (phone number – optional) CITY CITY ories: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A
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(h). Joint Fundrais	•		
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2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connecte	d Organization, Affiliated Committee, Joint Fu	ındraising Representativ	e, or Leadership PAC Spons
PREMERA BLUE C	ROSS POLITICAL ACTION COMMITTEE	PREMERA PAC	
	7004 000TH 0TDEET 0WM 0.055		
Mailing Address	7001 220TH STREET SWMS 355		
	MOUNTLAKE TERRACE	WA	98043
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization X Affiliated Committee	Joint Fundraising Represent	ative Leadership PAC Spo
			ative Leadership PAC Spo
Designated Agent: Ident			ative Leadership PAC Spo
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	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
_	Organization, Affiliated Committee, Joint Fundament	draising Representative	e, or Leadership PAC Spons
WELLMARK, INC. P	AC (WELLPAC)		
Mailing Address	1331 GRAND AVENUESTA. 5W570		
3			
	DES MOINES	I IA	50309
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		nt Fundraising Representa	
esignated Agent: Identi	fy by name, address (phone number – optional)		
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esignated Agent: Identi			
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1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
-	d Organization, Affiliated Committee, Joint Fu		
BLUE CROSS AND	BLUE SHIELD OF NORTH CAROLINA EN	MPLOYEE POLITICAL	ACTION COMMITTEE
Mailing Address	P.O. Box 2291		
	Durham	NC NC	27702
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization X Affiliated Committee J	oint Fundraising Represent	Leadership PAC Sp
		-	Leadership PAC Sp
esignated Agent: Ident		-	Leadersnip PAC Sp
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3.				FEC II	number	C
4.	1 1 1 1 1 1			FEC II	number	C
						
	-	_			oresentative	e, or Leadership PAC Spons
BLUE	PAC - BLUE CR	COSS BLUE SHIE	ELD ASSOCIATION F	AC		
Mai	iling Address	1310 G STREET	NW			<u> </u>
		WASHINGTON		, , , , , ,	DC	20005
Rel	ationship:		CITY A		STATE A	ZIP CODE ▲
Full N	lame					
	Name					
Mailir			CITY A		STATE A	ZIP CODE A

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h). Joint Fundrais i	ing i artiolpanti		
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2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
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-	d Organization, Affiliated Committee, Joint Fu		
BLUECROSS BLUE	SHIELD OF TENNESSEE INC POLITICA	L ACTION COMMITTE	:E (BCBSTN PAC)
Mailing Address	1 Cameron Hill Circle		
	Chattanooga	TN	37402
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization X Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Sp
			ative Leadership PAC Sp
esignated Agent: Ident			ative Leadership PAC Sp
esignated Agent: Ident			ative Leadership PAC Sp
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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
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3.		FEC ID number	C
4.		FEC ID number	C
-	I Organization, Affiliated Committee, Joint Fur		
Mailing Address	INTERSTATE 20 AT ALPINE ROAD		
	COLUMBIA	sc	29214
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Full Name			<u> </u>
Full Name			
	CITY A	STATE A	ZIP CODE A
Mailing Address	CITY A	STATE Telephone Number	ZIP CODE A
Mailing Address TITLE OR POSITION	ories: List all banks or other depositories in white paintains funds.	Telephone Number	s funds, holds accounts, rent
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Mailing Address TITLE OR POSITION Fanks or Other Deposit afety deposit boxes or make the position of the pos	ories: List all banks or other depositories in white paintains funds.	Telephone Number	s funds, holds accounts, rent