

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)

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NAME OF COMMITTEE (in Full)

ANTHEM INSURANCE COMPANIES, INC GOOD GOVERNMENT PROGRAM PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>CHERYL BLADIVEX</u> <u>453 Royal Oak Dr</u> <u>Alexandria, VA 41001</u>	<u>Anthem, inc</u>	<u>7/2/97</u>	<u>\$ 500.00</u>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>DIRECTOR</u>	Aggregate Year-to-Date: <u>> \$ 500.00</u>	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>DONALD STENGEL</u> <u>107 URSALIN</u> <u>GREENWOOD, IN 46143</u>	<u>Anthem, inc</u>	<u>12/7/97</u>	<u>\$ 250.00</u>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>DIRECTOR</u>	Aggregate Year-to-Date: <u>> \$ 250.00</u>	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>DR. SUSAN BEADE</u> <u>ONE CENTENNIAL AVE</u> <u>PISCATAWAY, NJ 08852</u>	<u>ANTHEM, INC</u>	<u>Payroll Dec.</u>	<u>650.00</u> <u>(\$ 50 Bi-Week)</u>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>MEDICAL DIRECTOR</u>	Aggregate Year-to-Date: <u>> \$ 8,200.00</u>	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>JEREMIAH HANRAHAN</u> <u>ONE CENTENNIAL AVE</u> <u>PISCATAWAY, NJ 08852</u>	<u>ANTHEM, INC</u>	<u>Payroll Dec</u>	<u>325.00</u> <u>(\$ 25 Bi-Week)</u>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>SUP</u>	Aggregate Year-to-Date: <u>> \$ 425.00</u>	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>PAUL LEININGER</u> <u>ONE CENTENNIAL AVE</u> <u>PISCATAWAY, NJ 08852</u>	<u>Anthem, inc</u>	<u>Payroll Dec</u>	<u>325.00</u> <u>(\$ 25 Bi-Week)</u>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>SUP</u>	Aggregate Year-to-Date: <u>> \$ 450.00</u>	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>JAMES WHITE</u> <u>ONE CENTENNIAL AVE</u> <u>PISCATAWAY, NJ 08852</u>	<u>Anthem, inc</u>	<u>Payroll Dec</u>	<u>504.00</u> <u>(\$ 42 Bi-Week)</u>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>COO</u>	Aggregate Year-to-Date: <u>> \$ 504.00</u>	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>LUCY THOMPSON</u> <u>6050 OUTSTANDING LANE</u> <u>LOUISVILLE, KY 40205</u>	<u>ANTHEM, INC</u>	<u>Payroll Dec</u>	<u>416.00</u> <u>(\$ 32 Bi-Week)</u>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>VP SALES</u>	Aggregate Year-to-Date: <u>> \$ 416.00</u>	

SUBTOTAL of Receipts This Page (optional)

2,970.00

TOTAL This Period (last page this line number only)