

**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 67 OF 276		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Bluepac - Blue Cross Blue Shield Association Pac

A. Michael Guyette
 Full Name (Last, First, Middle Initial)
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Cross and Blue Shield of Minnesot Occupation President & Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : 20150224143623-7
 Amount of Each Receipt this Period
 100.00

B. Michael Guyette
 Full Name (Last, First, Middle Initial)
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Cross and Blue Shield of Minnesot Occupation President & Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : 2015031015439-7
 Amount of Each Receipt this Period
 100.00

C. Michael Guyette
 Full Name (Last, First, Middle Initial)
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Cross and Blue Shield of Minnesot Occupation President & Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 20 / 2015
Transaction ID : 20150324161954-7
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	