



Kansas City

2301 Main Street Kansas City, MO 64108 • (816) 395-2222 • BlueKC.com

RECEIVED
FEC MAILCENTER
2022 JUL 27 PM 12:46

July 18, 2022

Federal Election Commission
1050 First Street, NE
Washington, D.C. 20463

Re: Blue Cross and Blue Shield of Kansas City
Federal Political Action Committee
FEC No. C00301358
Amended Statement of Organization

Dear Sir or Madam:

Enclosed for filing is an updated Statement of Organization, submitted on behalf of Blue Cross and Blue Shield of Kansas City Federal Political Action Committee. The Statement of Organization was updated to reflect the new custodian of records.

If you have any questions, please feel free to contact me at (816) 395-2801 or by e-mail at Coni.Fries@BlueKC.com

Sincerely,

Coni Fries
VP, Government Relations

Enclosure

2022-07-27-03:00:15:498

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED
FEC MAILCENTER

2022 JUL 27 PM 12:47

Office Use Only

1. NAME OF COMMITTEE (In full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Blue Cross and Blue Shield of Kansas City

Federal Political Action Committee

ADDRESS (number and street)

2301 Main Street

(Check if address is changed)

Kansas City

CITY ▲

MO

STATE ▲

64108

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

Coni.Fries@BlueKC.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 07/18/2022

3. FEC IDENTIFICATION NUMBER C 0 0 3 0 1 3 5 8

4. 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 Coni Fries

Signature of Treasurer

Coni Fries

Date

7/18/22

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
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 03/2022)

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 candidate information below.)

Name of Candidate _____

Candidate	Office				State
Party Affiliation	Sought:	House	Senate	President	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 _____ (Democratic, Republican, etc.) Party

Political Action Committee (PAC):

- (e) ☒ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

<input checked="" type="checkbox"/> Corporation	Corporation w/o Capital Stock	Labor Organization
Membership Organization	Trade Association	Cooperative

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 fund or party committee. (i.e., nonconnected committee)

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 political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____

2. _____

C

C

2025 RELEASE UNDER E.O. 14176

Write or Type Committee Name

Blue Cross and Blue Shield of Kansas City Federal PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Blue Cross and Blue Shield of Kansas City

Mailing Address

2301 Main Street

Kansas City

MO

64108

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: ☒ Connected Organization ☐ Affiliated Organization ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name Coni K. Fries

Mailing Address

2301 Main Street

Kansas City

MO

64108

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

VP, Government Relations

Telephone number

816-395-2801

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer Coni K. Fries

Mailing Address

2301 Main Street

Kansas City

MO

64108

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

VP, Government Relations

Telephone number

816-395-2801

Full Name of
Designated
Agent

Coni K. Fries

Mailing Address

2301 Main Street

Kansas City

MO

64108

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

VP, Government Relations

Telephone number

816-395-2801

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Commerce Bank

Mailing Address

1000 Walnut

Kansas City

MO

64106

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

20250727 PM 00:11:00

5(i) or (j). Joint Fundraising Participant:

1.	<input type="text"/>	FEC ID number	C
2.	<input type="text"/>	FEC ID number	C
3.	<input type="text"/>	FEC ID number	C
4.	<input type="text"/>	FEC ID number	C

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name Mailing Address

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

 Telephone Number --

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank,
Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

2025-07-27 03:00:15:50:1

13000-Virg
419169
City, MO 64141-6169

Federal Election Commission
1050 First Street, NE
Washington, D. C. 20463



W
PITNEY BOWES
02 1P
0000912920 JUL 19 2022
MAILED FROM ZIP CODE 64161

\$ 001.44

RECEIVED
FEC MAIL CENTER
2022 JUL 27 PM 12:46

NONPROFIT ORGANIZATION

2022-07-27 09:00:00

Federal Election Commission	
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS	
The FEC added this page to the end of this filing to indicate how it was received.	
<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 07-19-2022
<input type="checkbox"/> USPS Registered/Certified	Date of Receipt 07-27-2022
<input type="checkbox"/> USPS Priority Mail	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
BWS PREPARER	07-27-2022 DATE PREPARED