

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

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

FOR LINE NUMBER: PAGE 175 OF 306

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

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

A. Eckert, Michael, , ,

Mailing Address 2595 Parkway Pl

City
Hartland

State
MI

Zip Code
48353-3229

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Accident Fund Holdings, Inc.

Occupation (for Individual)
Director, Loss Control

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

11 / 21 / 2018

Transaction ID : AB1123DAFD39E4CAEA80

Amount of Each Receipt this Period

96.00

☐ Memo Item

Payroll Deduction: \$32.00/Bi-Weekly

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

B. Ottenweller, Carrie, , ,

Mailing Address 1100 Breton Rd SE

City
Grand Rapids

State
MI

Zip Code
49506-3530

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Blue Cross Blue Shield of Michigan

Occupation (for Individual)
Manager-key Account

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

11 / 21 / 2018

Transaction ID : A090CC03A66CA4A51B7B

Amount of Each Receipt this Period

39.00

☐ Memo Item

Payroll Deduction: \$13.00/Bi-Weekly

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

C. Moore, Mary, , ,

Mailing Address 24360 Crystal Drive

City
Flat Rock

State
MI

Zip Code
48134-8047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Blue Cross Blue Shield of Michigan

Occupation (for Individual)
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

768.00

Date of Receipt

11 / 21 / 2018

Transaction ID : A21638B1C936B48419F1

Amount of Each Receipt this Period

96.00

☐ Memo Item

Payroll Deduction: \$32.00/Bi-Weekly

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

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

231.00