

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Blue Cross Blue Shield of Michigan PAC

ADDRESS (number and street)

602 W. Ionia

☐Check if different
than previously
reported. (ACC)

Lansing

MI

48933

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00084061

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☒July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2009

through

06

30

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mr. Mark Cook

Signature of Treasurer

Electronically Filed by Mr. Mark Cook

Date

07

31

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name
Blue Cross Blue Shield of Michigan PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		280272.72
(b) Cash on Hand at Beginning of Reporting Period	280480.21	
(c) Total Receipts (from Line 19)	294253.84	294253.84
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	574734.05	574526.56
7. Total Disbursements (from Line 31)	254824.59	254824.59
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	319909.46	319701.97
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Blue Cross Blue Shield of Michigan PAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	152800.84	152800.84
(ii) Unitemized	134775.91	134775.91
(iii) TOTAL (add Lines 11(a)(i) and (ii)	287576.75	287576.75
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	287576.75	287576.75
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	5368.00	5368.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1309.09	1309.09
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	294253.84	294253.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	294253.84	294253.84

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	0.00	0.00	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	38868.00	38868.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	108.00	108.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	108.00	108.00	
29. Other Disbursements.....	215848.59	215848.59	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	254824.59	254824.59	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	254824.59	254824.59	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	287576.75	287576.75
34. Total Contribution Refunds (from Line 28(d))	108.00	108.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	287468.75	287468.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Capitol National Bank

Mailing Address 200 Washington Sq.

City

Lansing

State

MI

Zip Code

48933

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.88

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 9

Transaction ID: 30302950

Amount of Each Receipt this Period

252.88

Bank Interest Received (1-60)

B.

Full Name (Last, First, Middle Initial)

Capitol National Bank

Mailing Address 200 Washington Sq.

City

Lansing

State

MI

Zip Code

48933

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.01

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 8 / 2 0 0 9

Transaction ID: 30302952

Amount of Each Receipt this Period

231.13

Bank Interest Received (1-60)

C.

Full Name (Last, First, Middle Initial)

Capitol National Bank

Mailing Address 200 Washington Sq.

City

Lansing

State

MI

Zip Code

48933

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

729.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 9

Transaction ID: 30302953

Amount of Each Receipt this Period

245.63

Bank Interest Received (1-60)

SUBTOTAL of Receipts This Page (optional)

729.64

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 7 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Capitol National Bank

Mailing Address 200 Washington Sq.

City

Lansing

State

MI

Zip Code

48933

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

952.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 9

Transaction ID: 30302955

Amount of Each Receipt this Period

222.69

Bank Interest Received (1-60)

B.

Full Name (Last, First, Middle Initial)

Capitol National Bank

Mailing Address 200 Washington Sq.

City

Lansing

State

MI

Zip Code

48933

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1202.78

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: 30302956

Amount of Each Receipt this Period

250.45

Bank Interest Received (1-60)

C.

Full Name (Last, First, Middle Initial)

Capitol National Bank

Mailing Address 200 Washington Sq.

City

Lansing

State

MI

Zip Code

48933

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1309.09

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: 30302957

Amount of Each Receipt this Period

106.31

Bank Interest Received (1-60)

SUBTOTAL of Receipts This Page (optional)

579.45

TOTAL This Period (last page this line number only)

1309.09

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 223

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Peters for Congress

Mailing Address PO Box 226

City

Bloomfield Hills

State

MI

Zip Code

48303

FEC ID number of contributing
federal political committee.**C**

C00437889

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☐ General☒ Other (specify) ▼
Debt Retirement 20-
08

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	0	9

Transaction ID: 30303356

Amount of Each Receipt this Period

5000.00

Refund of Debt Retirement
Check Dated 11/13/08**B.**

Full Name (Last, First, Middle Initial)

Stabenow For Us Senate

Mailing Address PO Box 4945

City

East Lansing

State

MI

Zip Code

48826

FEC ID number of contributing
federal political committee.**C**

C00344473

Name of Employer

Occupation

Receipt For: 2010

☐ Primary ☒ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: 30314857

Amount of Each Receipt this Period

368.00

(In-Kind) Refund of In-Kind
Contributions (Printing
Labor & Cost 6/15/09)

SUBTOTAL of Receipts This Page (optional)

5368.00

TOTAL This Period (last page this line number only)

5368.00

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

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

FOR LINE NUMBER: PAGE 9 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Frances Diaz Plets

Mailing Address 46787 Scotch Pine Lane

City

Macomb Township

State

MI

Zip Code

48042-5374

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Mgr Medicare

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

18.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: 30340423

Amount of Each Receipt this Period

0.00

[MEMO ITEM]

Refund(s) on Schedule B
Totaling \$108.00 This changes
the YTD Total to \$18-
.00

B.

Full Name (Last, First, Middle Initial)

Joseph R Niemer

Mailing Address 2115 W Lincoln St

City

Birmingham

State

MI

Zip Code

48009-1826

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1001877522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Kenneth R Dallafior

Mailing Address 4556 Golf View Dr

City

Brighton

State

MI

Zip Code

48116-9750

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

SVP Grp Sls & Corp Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1023392322299

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

936.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 10 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Cindy S Monroe

Mailing Address 275 Applewood Lane

City

Bloomfield

State

MI

Zip Code

48302-1101

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Sr Dir Strategic Perf Consult

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1025169222299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

James D Line

Mailing Address 117 Wenonah Drive

City

Pontiac

State

MI

Zip Code

48341-1957

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1579218422299

Amount of Each Receipt this Period

211.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Deidra A Wilson

Mailing Address 3031 Crofton Dr

City

Dewitt

State

MI

Zip Code

48820-7770

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1593164922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

775.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Benjamin N Grier

Mailing Address 19841 Northbrook Dr

City

Southfield

State

MI

Zip Code

48076-5053

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director Treasury Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1593165122299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Monica L McKinney

Mailing Address 17596 Roxbury Ave

City

Southfield

State

MI

Zip Code

48075-4235

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1593166522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Erik T Poppe

Mailing Address 9639 Wexford Dr

City

Superior Twp

State

MI

Zip Code

48198-3286

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifeSecure

Occupation

TBD-Manager & Above

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1604519122299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

972.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 12 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Harvie Jarriell

Mailing Address 1219 Berkshire Dr

City

Williamston

State

MI

Zip Code

48895-9211

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1604520122299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Michael B Zell

Mailing Address 5411 Bright Creek Court

City

Flint

State

MI

Zip Code

48532-2254

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager-Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1604520322299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Kathryn G Levine

Mailing Address 1788 Pierce

City

Birmingham

State

MI

Zip Code

48009-2056

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
VP Corp Mktng & Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1691486022299

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1284.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 13 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Joseph H Hohner

Mailing Address 2106 Stonebridge Way

City

Canton

State

MI

Zip Code

48188-6227

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

SVP Chief of Staff & CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1723467722299

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Ann M Baker

Mailing Address 1153 Nottingham

City

Grosse Pointe Park

State

MI

Zip Code

48230-1339

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1750096522299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Richard A Hetzel

Mailing Address 635 McKinley St

City

Plymouth

State

MI

Zip Code

48170-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Corporate Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1793762922299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1608.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 14 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Phillip D Churchill Jr

Mailing Address 3026 Westchester Rd

City
Lansing

State
MI

Zip Code
48911-1044

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

06 / 30 / 2009

Transaction ID: PR1794222922299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Gary M Harvey

Mailing Address 1835 Robindale

City
Dearborn

State
MI

Zip Code
48128-1047

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
VP Systems Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

06 / 30 / 2009

Transaction ID: PR1794222922299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Elizabeth R Haar

Mailing Address 3607 Kipling Cir

City
Howell

State
MI

Zip Code
48843-7444

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
SRVP Subsidiary Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

06 / 30 / 2009

Transaction ID: PR1794230022299

Amount of Each Receipt this Period

900.00

P/R Deduction (\$75.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1788.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Kevin P Monaghan

Mailing Address 1719 Hillcrest Drive

City

Rochester Hills

State

MI

Zip Code

48306-3141

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Tech Solutions Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1805290422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Richard R Baharozian

Mailing Address 2525 Farm Brook Trail

City

Oxford

State

MI

Zip Code

48370-2305

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1805291022299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Joseph O David

Mailing Address 345 Troon Lane

City

Canton

State

MI

Zip Code

48188-3098

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1805292222299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

648.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 16 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Shelley L Van Riper

Mailing Address 353 Starkweather St

City

Plymouth

State

MI

Zip Code

48170-1329

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Health Care Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1805296922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Deirdre L Hope

Mailing Address 44170 Westminister Way

City

Canton

State

MI

Zip Code

48187-3165

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Analyst - Senior

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1805304322299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Dan A Mekled

Mailing Address 1750 N Rosevere

City

Dearborn

State

MI

Zip Code

48128-1243

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1812696722299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

648.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 17 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Jeffrey M Tenerowicz

Mailing Address 19733 Cardene Way

City

Northville

State

MI

Zip Code

48167-2927

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Consultant Product Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1812702422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Paul H Manojan

Mailing Address 37580 Mallory

City

Livonia

State

MI

Zip Code

48154-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Technology Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1812708922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Bradley A Anderson

Mailing Address 67900 S Forest

City

Richmond

State

MI

Zip Code

48062-1627

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Application Developer Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1812709722299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

648.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 18 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Larry R Watson

Mailing Address 2462 Coe Court

City

Perrysburg

State

OH

Zip Code

43551-5623

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1839243722299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Eva L Wendt

Mailing Address 3692 Watuga St

City

Commerce Twp

State

MI

Zip Code

48390-1058

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
VP Subsidiary Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1839247522299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Michelle Oginsky

Mailing Address 5522 Hertford Dr

City

Troy

State

MI

Zip Code

48085-3235

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Actuary-Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1915079222299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

972.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 19 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Ronald Arambula

Mailing Address 2020 Palmer Dr

City

Wixom

State

MI

Zip Code

48393-1247

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager Enterprise Security

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1922368422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Michael Allie

Mailing Address 25603 Arcadia Dr

City

Novi

State

MI

Zip Code

48374-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1933686422299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Terrence Rush

Mailing Address 47185 Marisa Ct

City

Plymouth

State

MI

Zip Code

48170-3491

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager-Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1933687622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 20 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Thomas Borgula

Mailing Address 35831 Candlewood

City

Sterling Heights

State

MI

Zip Code

48312-4125

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1933688022299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Miriam Burch

Mailing Address 21985 Ember Ct

City

Grosse Ile

State

MI

Zip Code

48138-3001

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Attorney Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1933689522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Richard Ward

Mailing Address 6710 Riverside Dr E

City

Windsor

State

ON

Zip Code

N8S 1-B9

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
VP Clin Pgms & Med Infomtcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1933690022299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

972.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 21 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Tricia Keith

Mailing Address 1918 Lloyd Ave

City

Royal Oak

State

MI

Zip Code

48073-3803

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Corporate Secy & Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1933690122299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

James Pranschke

Mailing Address 36025 Grennada

City

Livonia

State

MI

Zip Code

48154-5241

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1933693322299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Faisal Khan

Mailing Address 1091 Beaver Run

City

Troy

State

MI

Zip Code

48083-5458

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR1933697122299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1104.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 22 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Mary Moore

Mailing Address 7732 Hipp

City

Taylor

State

MI

Zip Code

48180-2613

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2083466322299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Sarilyn Hogan

Mailing Address 4180 Cross Road

City

White Lake

State

MI

Zip Code

48386-1207

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifeSecure

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2124827722299

Amount of Each Receipt this Period

268.00

P/R Deduction (\$9.00 Bi-W-weekly)

C.

Full Name (Last, First, Middle Initial)

James Simmon

Mailing Address 1269 Roslyn Rd

City

Grs Pte Woods

State

MI

Zip Code

48236-1385

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2125156122299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

832.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 23 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Sharon Gipson

Mailing Address 33983 Brittany Dr

City

Farmington Hills

State

MI

Zip Code

48335-1427

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director Asst Gen Auditor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2139035022299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Raymond Sohn Jr

Mailing Address 1029 Rock Spring Road

City

Bloomfield Hills

State

MI

Zip Code

48304-3145

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2143520322299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Jeffrey Connolly

Mailing Address 3650 Bluff Ridge Rd

City

Traverse City

State

MI

Zip Code

48686-8648

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP BCBSM & Pres West MI Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2150990722299

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1608.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 24 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Kristen Kangas-Kraft

Mailing Address 1219 S Swegles St

City

Saint Johns

State

MI

Zip Code

48879-2321

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2161835222299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Karriem Shakoor

Mailing Address 22555 Nancy Ave

City

Southfield

State

MI

Zip Code

48034-3940

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Sr Dir IT Systems Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2161835422299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Kurt Barr

Mailing Address 20931 Kenmore

City

Harper Woods

State

MI

Zip Code

48225-1700

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2161837222299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1044.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 25 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Richard Williams

Mailing Address 43971 Columbia Dr

City

Clinton Twp

State

MI

Zip Code

48038-1327

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2161837422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Michael Dunn

Mailing Address 27440 Lathrup Blvd

City

Lathrup Village

State

MI

Zip Code

48076-3575

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2161837622299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Christine Farah

Mailing Address 9000 Fellows Creek Dr

City

Plymouth

State

MI

Zip Code

48170-6354

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
VP Middle & Small Grp Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2161841222299

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1284.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 26 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Laurie Westfall

Mailing Address 3100 N Milford Rd

City

Highland

State

MI

Zip Code

48357-3549

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
SVP & COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2161842422299

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Melissa Frankel-Wagner

Mailing Address 67875 Pinewood Ln

City

Richmond

State

MI

Zip Code

48062-5904

FEC ID number of contributing
federal political committee.

C

Name of Employer
DentelMax

Occupation
VP Sales & Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2161842922299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Kimberly Sharbatz

Mailing Address 21431 Newcastle Rd

City

Harper Woods

State

MI

Zip Code

48225-2363

FEC ID number of contributing
federal political committee.

C

Name of Employer
DentelMax

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2161843022299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1476.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 27 / 223

(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

A.

Full Name (Last, First, Middle Initial)

David Hetrick

Mailing Address 7242 E Cortez Rd

City

Scottsdale

State

AZ

Zip Code

85260-5459

FEC ID number of contributing
federal political committee.

C

Name of Employer
DenteMax

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR216184422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Martin Risedorph

Mailing Address 590 Terrace Ln E

City

Ypsilanti

State

MI

Zip Code

48198-3044

FEC ID number of contributing
federal political committee.

C

Name of Employer
DenteMax

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR216184762299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Robert Milewski

Mailing Address 59769 Glacier Club Dr

City

Washington Twp

State

MI

Zip Code

48094-2287

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
SVP Ops & Hospital Relatn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR216313642299

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1152.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 28 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Kelley Monterusso

Mailing Address 11725 Forestwood Drive

City

Cedar Springs

State

MI

Zip Code

49319-8236

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director - Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212073922299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Laurie Wesolowicz

Mailing Address 17455 Maple Hill Dr

City

Northville

State

MI

Zip Code

48168-3225

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212075122299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

James Lang

Mailing Address 9050 Carter Dr

City

Saline

State

MI

Zip Code

48176-8006

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Pharmacy Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212084722299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1104.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 29 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Darrell Middleton

Mailing Address 5669 Shore Dr

City

Orchard Lake

State

MI

Zip Code

48324-2966

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

SVP Bus Effic & Human Perf

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212084822299

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

M Goheen

Mailing Address 46655 Pinehurst Cir

City

Northville

State

MI

Zip Code

48168-8488

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212084922299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Taryn Reinhart

Mailing Address 399 Starr Dr

City

Troy

State

MI

Zip Code

48083-1651

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager Medical Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212092222299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1476.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Michael Fulkerson Jr

Mailing Address 300 Hamilton
#105

City	State	Zip Code
Plymouth	MI	48170-7202

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSMOccupation
Manager Membership

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR2212093322299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-
Weekly)**B.**

Full Name (Last, First, Middle Initial)

Duane DiFranco

Mailing Address 11817 Hunters Creek Ct

City	State	Zip Code
Plymouth Township	MI	48170-2822

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSMOccupation
Regional Med Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR2212094322299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-
Weekly)**C.**

Full Name (Last, First, Middle Initial)

Elaina Lee

Mailing Address 24953 Auburn Lane

City	State	Zip Code
Southfield	MI	48033-4860

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSMOccupation
Mgr Oper Srv Improvement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR2212097022299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 31 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Jill Jarvela

Mailing Address 7436 Charrington Drive

City

Canton

State

MI

Zip Code

48187-1819

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Lead Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212097322299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

James Haskins IV

Mailing Address 25863 Woodward Avenue
Apt 202

City

Royal Oak

State

MI

Zip Code

48067-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212100322299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Amienne Frenzel

Mailing Address 4591 Covered Bridge

City

Bloomfield Hills

State

MI

Zip Code

48302-1831

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Federal Business Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212103322299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

972.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 32 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Keith Adkins

Mailing Address 4371 Fieldview

City

Grand Ledge

State

MI

Zip Code

48837

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

VP, Marketing

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212272522299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Linda Barnes

Mailing Address 697 W Lansing Rd

City

Morrice

State

MI

Zip Code

48857

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Director, Service Center

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212272922299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Donald Bearden

Mailing Address 1414 Wellington Road

City

Lansing

State

MI

Zip Code

48910

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Corporate Medical Director

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212273222299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1236.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 33 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Michael Britt

Mailing Address 5439 Timberbend Drive

City

Brighton

State

MI

Zip Code

48116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Ex VP, Insurance Operations

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212274122299

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Patricia Cook

Mailing Address 542 Dorchester Way

City

Milford

State

MI

Zip Code

48381

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Manager, Claims

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212276222299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Stephan Cooper

Mailing Address 6456 Island Lake Drive

City

East Lansing

State

MI

Zip Code

48823

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Vice President, Claims

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212276622299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1476.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 34 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Lisa Crozier

Mailing Address 7269 Pine Vista

City

Brighton

State

MI

Zip Code

48116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Director, Claims

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212277122299

Amount of Each Receipt this Period

505.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Alan Gileczek

Mailing Address 7053 N Lake Orchard Drive

City

Gregory

State

MI

Zip Code

48137

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

VP Regional Operations

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212280722299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Steven Hess

Mailing Address 5290 Park Lake Road

City

East Lansing

State

MI

Zip Code

48823-3800

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

EVP, General Counsel & Corp Sec

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212283022299

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1765.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 35 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Rebecca Holnagel

Mailing Address 5482 Maple Ridge

City

Haslett

State

MI

Zip Code

48840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Company

Occupation

Senior Actuarial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212283922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Gregory Howard

Mailing Address 2102 Winners Circle

City

St. Johns

State

MI

Zip Code

48879

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

Manager, Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212284222299

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Merrick Hurlbutt

Mailing Address 5604 Wood Valley

City

Haslett

State

MI

Zip Code

48840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

Manager, Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212284522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

672.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 36 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Paul Kauffman

Mailing Address 6091 Balmoral Way

City

Commerce Township

State

MI

Zip Code

48382

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Director TPA Operations

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212285622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Kerilyn Kittmann

Mailing Address 4325 Chancellor Drive

City

DeWitt

State

MI

Zip Code

48820

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Director, Accounting

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212286022299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Charles McGeehan

Mailing Address 915 N East St

City

Eaton Rapids

State

MI

Zip Code

48827

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Claims Examiner II

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212289122299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 37 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Jaime Mullen

Mailing Address 5935 Cartago Drive

City

Lansing

State

MI

Zip Code

48911

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

IS Customer Sys Support Mgr

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212290722299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Anthony Phillips

Mailing Address 8697 North Hills Ct.

City

Howell

State

MI

Zip Code

48843

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

VP and Chief Actuary

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212292822299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Rita Ramsey

Mailing Address 210 Mark Street

City

Mason

State

MI

Zip Code

48854

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Manager, Service Center

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212294022299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

972.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 38 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Michael Reid

Mailing Address 2333 El Dorado Dr. SE

City

East Grand Rapids

State

MI

Zip Code

49506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Manager, Claims

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212294622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Steven Reynolds

Mailing Address 12416 Golden Oaks Dr

City

Milford

State

MI

Zip Code

48380

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

VP Innovation & Planning

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212294822299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ronald Schoen

Mailing Address 121 Swallowtail Lane

City

Okemos

State

MI

Zip Code

48864

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Executive VP & CFO

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212296322299

Amount of Each Receipt this Period

600.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1356.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 39 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Michael Sekoni

Mailing Address 16590 Broadview Dr.

City

East Lansing

State

MI

Zip Code

48823

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

VP & General Auditor

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212297022299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Michael Seling

Mailing Address 4543 Will O Way Lane

City

Grand Ledge

State

MI

Zip Code

48837

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Senior Financial Sys Analyst

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212297122299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Tanya Roche

Mailing Address 1100 Onondaga Road

City

Holt

State

MI

Zip Code

48842

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Manager, Service Center

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212299622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

972.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 40 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Catherine Whitford

Mailing Address 1250 W Marshall Rd

City

St Johns

State

MI

Zip Code

48879

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Manager, Service Ctr-Payments

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212300622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Sheila Wright

Mailing Address 7782 Forestview Drive

City

Haslett

State

MI

Zip Code

48840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Manager, Business Development

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212301822299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Steven Zvonar

Mailing Address 3866 New Salem Ave

City

Okemos

State

MI

Zip Code

48864

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Web Application Developer III

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2212302122299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 41 / 223

(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

A.

Full Name (Last, First, Middle Initial)

John Edwards

Mailing Address 4620 Admiral Dr

City

Sterling Hts

State

MI

Zip Code

48310-3301

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Business Intelligence

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2225246922299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Equilla Wainwright

Mailing Address 200 River Place
Unit 11

City

Detroit

State

MI

Zip Code

48207-4397

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Diversity & Comm Respon

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2225249922299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Lynda Rossi

Mailing Address 1066 Foxborough Dr

City

Williamston

State

MI

Zip Code

48895-9206

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP SOC Missn & Public Affrs

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2225250922299

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1800.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Janice Simmons

Mailing Address 12630 N Yvonne Dr

City

Mequon

State

WI

Zip Code

53092-2328

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Sr Dir Human Performance

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2225257022299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-
Weekly)**B.**

Full Name (Last, First, Middle Initial)

John Colaluca

Mailing Address 33657 Chatsworth

City

Strlg Hts

State

MI

Zip Code

48312-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Dir Systems Development

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2225257322299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-
Weekly)**C.**

Full Name (Last, First, Middle Initial)

Bryan Boedigheimer

Mailing Address 2201 Marie Dr

City

Lake Orion

State

MI

Zip Code

48360-2298

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Project Manager Senior

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2225259822299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 43 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Karen Carroll

Mailing Address 294 1st St

City

Rochester

State

MI

Zip Code

48307-2600

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Clinical Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2225325122299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Jennifer Steinhilber

Mailing Address 203 N Court St

City

Howell

State

MI

Zip Code

48843-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2229122322299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

James Robb

Mailing Address 3413 Wolverine Dr

City

Troy

State

MI

Zip Code

48083-6803

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Special Asst to CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2230124322299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

648.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 44 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Sean Carlson

Mailing Address 4964 Greenview Dr

City

Commerce Twp

State

MI

Zip Code

48382-1561

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2232097522299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Patrice Matejka

Mailing Address 19520 Hillcrest

City

Livonia

State

MI

Zip Code

48152-1723

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2232097722299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Kimberly Mayes

Mailing Address 3624 Balfour Rd

City

Detroit

State

MI

Zip Code

48224-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Mgr Prov Sys

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2232103922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 45 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Patricia Soyemi

Mailing Address 32151 W 12 Mile Rd

City

Farmington Hills

State

MI

Zip Code

48334-3502

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager-Key Account

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2243282522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Shirley Glazier

Mailing Address 16384 Brookwood Ct

City

Northville

State

MI

Zip Code

48168-3492

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2247506822299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Allison Combs

Mailing Address 4122 Willow Pond Dr

City

Ypsilanti

State

MI

Zip Code

48197-1034

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Strategy Perf Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2250305022299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 46 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Stacey Repotski

Mailing Address 43984 Cottisford

City

Northville

State

MI

Zip Code

48167-8945

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Clinical Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2250307622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mark Owen

Mailing Address 188 N Glenhurst Dr

City

Bloomfield Hills

State

MI

Zip Code

48301-2631

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Federal Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2250308122299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

John Ganos

Mailing Address 316 Abbey Wood Drive

City

Rochester

State

MI

Zip Code

48306

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2259844322299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

972.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 47 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Mary Mackenzie

Mailing Address 1534 Creal Crescent

City

Ann Arbor

State

MI

Zip Code

48103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2259844622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Clyde Scott

Mailing Address 20636 Maple Lane

City

Grosse Pointe Wood

State

MI

Zip Code

48236

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2259844722299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Marsha Tracy

Mailing Address 12451 Oakland Hills

City

DeWitt

State

MI

Zip Code

48820

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2259845022299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 48 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Richard Weiser

Mailing Address 1939 Oneida Drive

City

Okemos

State

MI

Zip Code

48864

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2259845122299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Jason Welsh

Mailing Address 14031 Manhattan

City

Oak Park

State

MI

Zip Code

48237

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2259845222299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Richard Zapala

Mailing Address 1915 Creek Landing

City

Haslett

State

MI

Zip Code

48840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2259845422299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 49 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Richard Znidarsic

Mailing Address 14970 Forest Hill Road

City

Grand Ledge

State

MI

Zip Code

48837

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2259845522299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Dan Zolkowski

Mailing Address 1841 Ridgewood Drive

City

East Lansing

State

MI

Zip Code

48823

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2259845622299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Anthony Lancione

Mailing Address 2463 Lost Creek Drive

City

Flushing

State

MI

Zip Code

48433

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2259846022299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1236.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 50 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Christopher Beasley

Mailing Address 405 Harvest Lane

City

Lansing

State

MI

Zip Code

48917

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2259891422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Brad Baty

Mailing Address 4733 Bluebird Court

City

Dexter

State

MI

Zip Code

48130-9372

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation
Manager

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2262072222299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Corey Krystyniak

Mailing Address 2927 Hartline Dr

City

Rochester Hills

State

MI

Zip Code

48309-4316

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation
Spec Procurement Advanced

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2262073822299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

648.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 51 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Paula Mutch

Mailing Address 46344 Turnbuckle Ln

City

Macomb

State

MI

Zip Code

48044-6204

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager-Key Account

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2262074522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mark Polsgrove

Mailing Address 22603 Chestnut Tree Way

City

Novi

State

MI

Zip Code

48375-4362

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Application Developer Adv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2263623522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Matthew Haran

Mailing Address 1711 Glengarry Blvd

City

Canton

State

MI

Zip Code

48188

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2286146522299

Amount of Each Receipt this Period

360.00

P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

792.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 52 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Ronald Hagen

Mailing Address 25498 Constitution

City

Novi

State

MI

Zip Code

48375-1764

FEC ID number of contributing
federal political committee.

C

Name of Employer
LifeSecure

Occupation
VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2289653422299

Amount of Each Receipt this Period

284.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Timothy Oehlberg

Mailing Address 479 Clair Hill Dr

City

Rochester Hills

State

MI

Zip Code

48309-2114

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2359823722299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Linda Oliver

Mailing Address 7053 Dean Farm Rd

City

New Albany

State

OH

Zip Code

43054-9216

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2359827822299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

980.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 53 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Corrie Beaverson

Mailing Address 5683 Caren Dr

City

Ypsilanti

State

MI

Zip Code

48197-8348

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2359828722299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Brian Mabie

Mailing Address 42309 Oakland Drive

City

Canton

State

MI

Zip Code

48188-5218

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Analyst - Pharmacy Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2359831922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

James Gallagher

Mailing Address 36114 Jamison Street

City

Livonia

State

MI

Zip Code

48154-5115

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Clinical Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2359832522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

648.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 54 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Heather Price

Mailing Address 43524 Scenic Ln

City

Northville

State

MI

Zip Code

48167-8927

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director - Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2364449422299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Michael Reinholm

Mailing Address 1249 Larkmoor Blvd

City

Berkley

State

MI

Zip Code

48072

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2364453822299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ted Smith

Mailing Address PO Box 10128

City

Lansing

State

MI

Zip Code

48901-0128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2364453922299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1104.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 55 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Jeffrey Nielson

Mailing Address 24802 Apple Crest Dr

City

Novi

State

MI

Zip Code

48375-2602

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2364459522299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Michael Wood

Mailing Address 14889 Peacock Rd.

City

East Lansing

State

MI

Zip Code

48823

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Company

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2371491122299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Gary Tygart Jr

Mailing Address 8864 Indigo Ln

City

Ypsilanti

State

MI

Zip Code

48197-1066

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2371537522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 56 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Paul MacLellan

Mailing Address 7395 Wellington Road

City

Brighton

State

MI

Zip Code

48116-8593

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2374878322299

Amount of Each Receipt this Period

319.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Paul Mozak

Mailing Address 22552 Havergale St

City

Novi

State

MI

Zip Code

48374-3792

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2374879322299

Amount of Each Receipt this Period

550.00

P/R Deduction (\$50.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Nancy Chiesa

Mailing Address 8702 Bonaventure Drive

City

Brighton

State

MI

Zip Code

48116

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2405551622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1085.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 57 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Bert Foote

Mailing Address 4335 West Pointe Drive

City

Waterford

State

MI

Zip Code

48329

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2405551722299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Victoria Kell

Mailing Address 8175 Hunter Road

City

Bath

State

MI

Zip Code

48808

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR2405551922299

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Vanette M Hill

Mailing Address 5708 W Hickory Hollow

City

Wayne

State

MI

Zip Code

48184-2651

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824426722299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

672.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 58 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Lisa L Drayton

Mailing Address 9335 Sanilac

City

Detroit

State

MI

Zip Code

48224-1245

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824707022299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mary A Smith

Mailing Address 10058 King Rd

City

Davisburg

State

MI

Zip Code

48350-1900

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Hlth Care Dlv Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824755622299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

William T Allen

Mailing Address 602 W Houstonia

City

Royal Oak

State

MI

Zip Code

48073-4082

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director Asst Gen Auditor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824759722299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1104.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 59 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Warren S Sylvertooth

Mailing Address 530 S Piper Ct

City

Detroit

State

MI

Zip Code

48215-3295

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824772422299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Kimberley C Scicluna

Mailing Address 23124 Liberty

City

St Clr Sh

State

MI

Zip Code

48080-1503

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Proj Mgr PPI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824772522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Reina H Navarra

Mailing Address 43529 Bayfield

City

Clntn Twp

State

MI

Zip Code

48038-1303

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824772722299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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☒ 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

A.

Full Name (Last, First, Middle Initial)

Helen Stojic

Mailing Address 28 Elm Park Blvd

City

State

Zip Code

Plsnt Rdg

MI

48069-1105

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824776122299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

DeAndre A Lipscomb

Mailing Address 29064 Raleigh Rd

City

State

Zip Code

Farmington Hills

MI

48336-1453

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824778922299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

James E Negro

Mailing Address 5270 Inverrary Ln

City

State

Zip Code

Commrce Twp

MI

48382-1048

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director Sales Infrm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824782022299

Amount of Each Receipt this Period

396.00

P/R Deduction (\$33.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1092.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 61 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Deanne E Seifert

Mailing Address 5517 Kingfield Dr

City

West Bloomfield

State

MI

Zip Code

48322-1459

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager Sales Infrm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824782322299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Kevin Kitze

Mailing Address 47793 Royal Pointe Dr

City

Canton

State

MI

Zip Code

48187-5464

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Health Care Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824782622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Michelle M Storz

Mailing Address 411 Manor Street

City

Grosse Pointe Farm

State

MI

Zip Code

48236-3210

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824782822299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

648.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 62 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Randolphe J Roulier

Mailing Address 11032 Melrose

City

Livonia

State

MI

Zip Code

48150-2824

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director - Senior Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824783022299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Scott J Hamerink

Mailing Address 1315 Kingspath Dr

City

Rochester Hills

State

MI

Zip Code

48306-3728

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Consultant Product Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824783122299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mary E Mohn

Mailing Address 256 Felice St

City

Wyandotte

State

MI

Zip Code

48192-3416

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824784022299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 63 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Richard T Theisen

Mailing Address 23250 Cheltenham Ln

City

Dearbn Hts

State

MI

Zip Code

48127-2365

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824785122299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Bryant D Greene

Mailing Address 2081 Hazelwood

City

Detroit

State

MI

Zip Code

48206-2283

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Attorney Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824785222299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Lisa M Varnier

Mailing Address 4139 Wakefield

City

Berkley

State

MI

Zip Code

48072-3463

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824786022299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 64 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Timothy P Cook

Mailing Address 4148 Stamper Way

City

Howell

State

MI

Zip Code

48855-3977

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824786922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Amy E Modlin

Mailing Address 2312 Fort William Dr

City

Olney

State

MD

Zip Code

20832-1665

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824787422299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mark A Cook

Mailing Address 1121 Lone Oak Dr

City

Mason

State

MI

Zip Code

48854-8714

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
VP Governmental Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824787522299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1104.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 65 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Laura D Walker

Mailing Address 26192 Summerdale Dr
Bldg 12 Unit 92

City State Zip Code
Southfld MI 48033-6135

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR82478822299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Laurine Symula Parmely

Mailing Address 5772 Martell Drive

City State Zip Code
Troy MI 48085-3160

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR82479192299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Jeffrey P Rumley

Mailing Address 1750 Vernier
Apt 10

City State Zip Code
Grosse Pointe Wood MI 48236-1572

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
VP and General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR82479232299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1236.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 66 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Colleen C Cohan

Mailing Address 17381 Ego Ave

City

Eastpointe

State

MI

Zip Code

48021-3101

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Dir Corporate Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824792422299

Amount of Each Receipt this Period

319.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Teresa Mikan

Mailing Address 1231 White Oaks

City

Okemos

State

MI

Zip Code

48864-3067

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824792622299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Frank Westley Jackson

Mailing Address 18664 Birchcrest

City

Detroit

State

MI

Zip Code

48221-2225

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.84

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824792822299

Amount of Each Receipt this Period

390.84

P/R Deduction (\$32.57 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1057.84

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Michael T Zajac

Mailing Address 53965 Sutherland Ct

City

Shelby Twp

State

MI

Zip Code

48316-1231

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR824793522299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Joseph W Murray

Mailing Address 22325 Yale St

City

St Clair Shores

State

MI

Zip Code

48081-2039

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR824793722299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Bart M Feinbaum

Mailing Address 30351 Southampton Ln

City

Farmington Hills

State

MI

Zip Code

48331-1727

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director Employee Labor Relat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR824794022299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1044.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 68 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Robert A Phillips

Mailing Address 21985 Ember Court

City

Grosse Ile

State

MI

Zip Code

48138-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824794122299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Kevin M Stanko

Mailing Address 2233 Camelot Drive

City

Troy

State

MI

Zip Code

48083-2556

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824794722299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Leo A Nouhan

Mailing Address 1326 Yorkshire

City

Grosse Pointe Park

State

MI

Zip Code

48230-1108

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824794822299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1044.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 69 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Matthew A Case

Mailing Address 9370 Big Hand Rd

City

Columbus

State

MI

Zip Code

48063-3013

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824794922299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Sue E Jenkins

Mailing Address 2391 Forest Oak Trl

City

Williamston

State

MI

Zip Code

48895-9032

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Attorney Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824795322299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Scott A Whipple

Mailing Address 7427 Fenton

City

Dearborn Hts

State

MI

Zip Code

48127-1751

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824795722299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1044.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 70 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Gregory W Anderson

Mailing Address 37161 Chesapeake

City

Frmgtn Hls

State

MI

Zip Code

48335-1142

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Corp & Financial Invst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824797422299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Douglas R Cedras

Mailing Address 2616 Mcclintock

City

Bloomfld

State

MI

Zip Code

48302-0756

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824798122299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Diane S Cesarz

Mailing Address 18525 Shadyside St

City

Livonia

State

MI

Zip Code

48152-3245

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824801422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1104.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 71 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Barbara A Brown-Cadovich

Mailing Address 356 Falling Brook Dr

City

State

Zip Code

Troy

MI

48098-4646

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Health Care Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824801622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Rollyn R Llewellyn II

Mailing Address 5897 Donaldson Dr

City

State

Zip Code

Troy

MI

48085-3109

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Technology Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824803522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Dawn J Geisert

Mailing Address 55907 Nicholas Dr

City

State

Zip Code

Shelby Twp

MI

48316-5817

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824804222299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

648.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 72 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Kimberly A Winnik

Mailing Address 18162 Cascade Dr

City

Northville

State

MI

Zip Code

48167-3286

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Sr Dir Corp Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824804722299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Frank J Slisinger

Mailing Address 34518 Morningdale Dr

City

Strlg Hts

State

MI

Zip Code

48312-5744

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824805122299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Deborah A Fritz-Elliott

Mailing Address 9112 Deer Trail

City

Brighton

State

MI

Zip Code

48114-7567

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824805422299

Amount of Each Receipt this Period

232.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

928.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 73 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Julie D Anderson

Mailing Address 954 W Marshall

City

Ferndale

State

MI

Zip Code

48220-1681

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Assoc Director Govt Prg Compl

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824807422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Richard J Werther

Mailing Address 45171 Courtview Trl

City

Novi

State

MI

Zip Code

48375-3861

FEC ID number of contributing
federal political committee.

C

Name of Employer
DentelMax

Occupation

VP Finance & Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824808422299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Dennis M Winkler

Mailing Address 2888 Kilburn Ct

City

Rchstr Hls

State

MI

Zip Code

48306-3025

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director Technical Prog Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824809022299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1104.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 74 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Dennis A Nunnold

Mailing Address 5500 Huntsman Dr

City

White Lk

State

MI

Zip Code

48383-1680

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Technology Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824809422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Pierre A McDougall

Mailing Address 19473 Tanglewood Circle

City

Clinton Township

State

MI

Zip Code

48038-4961

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824810522299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Sondra J Smith

Mailing Address 2914 Bamlet Rd

City

Royal Oak

State

MI

Zip Code

48073-2979

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824811122299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 75 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Robin G Mynhier

Mailing Address 3257 Outback Trl

City

Pinckney

State

MI

Zip Code

48169-8876

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Technology Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824811922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Michelle Billingsley

Mailing Address 12900 East Outer Drive

City

Detroit

State

MI

Zip Code

48224-2731

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824812222299

Amount of Each Receipt this Period

319.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Tonya L Hadnot

Mailing Address 10331 Dartmouth

City

Oak Park

State

MI

Zip Code

48237-1705

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824812622299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

883.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 76 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Jeffrey D Denhard

Mailing Address 5644 Cliffside Drive

City

State

Zip Code

Troy

MI

48085-3845

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Program Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824813622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Douglas E Darland

Mailing Address 529 Burtman

City

State

Zip Code

Troy

MI

48083-1042

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824814422299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Philip D Bone

Mailing Address 1497 Heights Rd

City

State

Zip Code

Lk Orion

MI

48362-2212

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager Admin

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824814822299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 77 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Bonnie K Harrington

Mailing Address 3468 Shaddick

City

Waterford

State

MI

Zip Code

48328-2560

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR82481522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Robert J Galac

Mailing Address 693 Bolinger

City

Rchstr Hls

State

MI

Zip Code

48307-2820

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR82481542299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Kathleen M Schummer

Mailing Address 1540 Oxford

City

Grs Pt Wds

State

MI

Zip Code

48236-1844

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR82481712299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 78 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Barbara G Derian

Mailing Address 2403 Sanders Place

City

Bloomfield

State

MI

Zip Code

48302-0460

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Dir Bus Configuration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824817222299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Charlene S Rayburn

Mailing Address 44739 North Hills Dr
Apt 98

City

Northville

State

MI

Zip Code

48167-6114

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Team Leader II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824819622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Rozanne M Fleszar

Mailing Address 23459 Danberry

City

Novi

State

MI

Zip Code

48375-3707

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824819822299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

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

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(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

A.

Full Name (Last, First, Middle Initial)

Kathleen M Dolan

Mailing Address 1617 Fleetwood

City

Troy

State

MI

Zip Code

48098-2512

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager - Project

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824820422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Donna L Waller

Mailing Address 894 Avon Court

City

Grs Pt Wds

State

MI

Zip Code

48236-1239

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824820522299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Brenda L Storie

Mailing Address 30060 Lamplighter

City

New Hudsn

State

MI

Zip Code

48165-9679

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824821222299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

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

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(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

A.

Full Name (Last, First, Middle Initial)

Jacqueline R Barden

Mailing Address 29629 Monterey Circle

City

Farmington Hills

State

MI

Zip Code

48336-1304

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824823722299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Charlotte J Stevens-Ankiel

Mailing Address 13836 Fordham

City

Detroit

State

MI

Zip Code

48205-2326

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824826022299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Jeffrey M Witzburg

Mailing Address 9650 Winterset Circle

City

Plymouth

State

MI

Zip Code

48170-3273

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Business Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824826422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

648.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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(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

A.

Full Name (Last, First, Middle Initial)

Joan M Budden

Mailing Address 3820 Woodlake Dr

City

Blmfld Hls

State

MI

Zip Code

48304-3074

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Individual Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824827422299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Carol L Purdy

Mailing Address 36989 Fox Glen

City

Farmington Hills

State

MI

Zip Code

48331-1803

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Strategy Perf Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824827922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Jeffrey J Reeve

Mailing Address 567 St Louis St

City

Ferndale

State

MI

Zip Code

48220-2436

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Marketing Research Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824828422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

972.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 82 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Donna D Stache

Mailing Address 3640 Worthington Ct

City

Rochester Hills

State

MI

Zip Code

48309-1180

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824828922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Patrice M Eller

Mailing Address 5153 Pecan Drive

City

Ypsilanti

State

MI

Zip Code

48197-6819

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824829322299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Frank A Maslowski

Mailing Address 5160 Mead

City

Dearborn

State

MI

Zip Code

48126-3018

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824829822299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Gerald W Noxon

Mailing Address 22745 Huron River Dr

City

New Bostn

State

MI

Zip Code

48164-9439

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824830022299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Ara L Rafaelian

Mailing Address 245 Crest

City

Ann Arbor

State

MI

Zip Code

48103-4315

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Health Care Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824831322299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Robyn A Rontal

Mailing Address 2397 Rockport Ct

City

Ann Arbor

State

MI

Zip Code

48103-8911

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824833022299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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(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

A.

Full Name (Last, First, Middle Initial)

Joan T Vercammen

Mailing Address 6865 Northpointe Ct.

City

Troy

State

MI

Zip Code

48085-1209

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824841622299

Amount of Each Receipt this Period

203.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Michael A Mattei

Mailing Address 6088 Glen Eagles

City

W Blmfld

State

MI

Zip Code

48323-2212

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824841922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Thomas A Marquard

Mailing Address 24516 Rockford

City

Dearborn

State

MI

Zip Code

48124-1333

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824845222299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

635.00

TOTAL This Period (last page this line number only)

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

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

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☒ 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

A.

Full Name (Last, First, Middle Initial)

Linda L Garrison

Mailing Address 5536 Victory Circle

City

Sterling Hts

State

MI

Zip Code

48310-7700

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Ford Vstn & Severstal Accts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824846022299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Vickianne Harbowy

Mailing Address 16092 Swathmore Ct North

City

Livonia

State

MI

Zip Code

48154-1005

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824850222299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Michael F Gurney

Mailing Address 36648 Almond Circle

City

Frmgtn Hls

State

MI

Zip Code

48335-3812

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824850422299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1236.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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☒ 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

A.

Full Name (Last, First, Middle Initial)

Elizabeth R Lepoutre

Mailing Address 36552 Catalpa Ln

City

New Baltimore

State

MI

Zip Code

48047-5575

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824852322299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Luzine Brister

Mailing Address 17145 Strathmoor

City

Detroit

State

MI

Zip Code

48235-3919

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824855922299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Brian D Armstrong

Mailing Address 1363 North Creek Dr

City

Wixom

State

MI

Zip Code

48393-1638

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
VP Group Sales Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824856022299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1104.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 87 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Rick V Morrone

Mailing Address 3751 Parker

City

Dearborn

State

MI

Zip Code

48124-3557

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP GM/Delphi Control Plan

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824857522299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Lori A Shannon

Mailing Address 2849 Courville Drive

City

Bloomfield Hills

State

MI

Zip Code

48302-1020

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager-Sales

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824858022299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Richard J Burgess

Mailing Address 5163 Springdale Ct

City

Clarkston

State

MI

Zip Code

48348-5039

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director - National Accounts

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824858222299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1104.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 88 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Annette M Sabatella

Mailing Address 411 Saddle Lane

City

State

Zip Code

Grs Pt Wds

MI

48236-2728

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824858522299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Carol E Gawronski

Mailing Address 12240 Rohn Road

City

State

Zip Code

Fenton

MI

48430-9519

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824859822299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Craig A Smith

Mailing Address 7141 Placita Ct.

City

State

Zip Code

Gd Rapids

MI

49546-7234

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager-Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824860122299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

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for each category of the
Detailed Summary Page

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(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

A.

Full Name (Last, First, Middle Initial)

Gregory A Mays

Mailing Address 33865 Trillium Court

City

Livonia

State

MI

Zip Code

48150-3685

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824860222299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Jayne E Scott

Mailing Address 2939 Muirwood Ct

City

Waterford

State

MI

Zip Code

48329-2396

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824860922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Regina R. Jamerson

Mailing Address 6875 Chase Court

City

W Bloomfield

State

MI

Zip Code

48322-3292

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824861622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 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

A.

Full Name (Last, First, Middle Initial)

Rodester J Begosa

Mailing Address 34270 Trillium Court

City

Livonia

State

MI

Zip Code

48150-3689

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager-Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824861722299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Gary R Gavin

Mailing Address 23784 Wintergreen

City

Novi

State

MI

Zip Code

48374-3680

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Key & Large Group Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824862122299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Julia M Kuks

Mailing Address 1073 Magnolia

City

Inkster

State

MI

Zip Code

48141-1731

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824864522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

972.00

TOTAL This Period (last page this line number only)

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

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

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☒ 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

A.

Full Name (Last, First, Middle Initial)

Martha M Spenny

Mailing Address 23633 Berg Rd

City

Southfield

State

MI

Zip Code

48034-4146

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824864622299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Camille K Forster

Mailing Address 9035 Woodlore South Dr.

City

Plymouth

State

MI

Zip Code

48170-3499

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824865422299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Kenneth J Setera

Mailing Address 46273 Glen Pointe Dr

City

Shelby Townshp

State

MI

Zip Code

48315-6126

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824877422299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1044.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Charmaine M Stevens

Mailing Address 47011 Mornington Rd

City

Canton

State

MI

Zip Code

48188-3000

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824881922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Rosemary Gundel

Mailing Address 52105 Loon Ct

City

Shelby Township

State

MI

Zip Code

48315-6946

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824882622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Lawrence Tomenello

Mailing Address 38040 Huron Pointe Dr

City

Harrsn Twp

State

MI

Zip Code

48045-2831

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824887522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

648.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Lawrence G Hoffman

Mailing Address 6872 Cedarbrook Dr

City

Bloomfield Hills

State

MI

Zip Code

48301-3017

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Technology Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824888622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Kathleen P Wodecki

Mailing Address 7640 Barnsbury

City

W Blmfld

State

MI

Zip Code

48324-3612

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824892222299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Janet P Macqueen

Mailing Address 3214 Chesapeake Dr

City

String Hts

State

MI

Zip Code

48314-1869

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Chief Info Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824899522299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

972.00

TOTAL This Period (last page this line number only)

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

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for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Susan H Remisiewicz

Mailing Address 18432 Stamford St

City

Livonia

State

MI

Zip Code

48152-4905

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824905022299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

David W Bulmer

Mailing Address 11321 Morgan Street

City

Plymouth

State

MI

Zip Code

48170-4436

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Technology Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824908322299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Annette M Robertson

Mailing Address 31264 Lund Ave

City

Warren

State

MI

Zip Code

48093-7917

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824908622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

648.00

TOTAL This Period (last page this line number only)

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

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(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

A.

Full Name (Last, First, Middle Initial)

Susan L Kuypers

Mailing Address 21524 Boyd Court

City

Macomb

State

MI

Zip Code

48044-3068

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824914222299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Richard J Phillips

Mailing Address 40101 W Huron River

City

Romulus

State

MI

Zip Code

48174-4811

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Mgr Finance Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824915222299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Karen P Spring

Mailing Address 5267 Kristi Lane

City

Commrce Twp

State

MI

Zip Code

48382-3356

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Assoc Dir Medicaid Liaison

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824916922299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

John C Golding

Mailing Address 42211 Garfield Rd
Apt 136

City State Zip Code
Clinton Township MI 48038-1648

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Sr Dir IT Systems Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824919522299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Michael R Benoit

Mailing Address 34921 25 Mile Road

City State Zip Code
Chesterfield MI 48047-2746

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824927422299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Laurence R Binder

Mailing Address 32300 Maryland

City State Zip Code
Livonia MI 48150-3814

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Technology Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824930322299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1104.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 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

A.

Full Name (Last, First, Middle Initial)

Joanne F Rusch

Mailing Address 4171 Fallow

City

W Blmfld

State

MI

Zip Code

48323-1242

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Principal Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824932722299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Kathryn L Wilson

Mailing Address 1361 Palmer

City

Plymouth

State

MI

Zip Code

48170-2069

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager Sales Infrm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824934522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Joseph D Kearney

Mailing Address 2391 Lexington Cir S

City

Canton

State

MI

Zip Code

48188-5907

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824935422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

972.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Carolynn Walton

Mailing Address 5835 Pinecroft Dr.

City

W Blmfld

State

MI

Zip Code

48322-1669

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP & Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR82493622299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mark S O'Neill

Mailing Address 13998 Merrie Meadow Ln

City

South Lyon

State

MI

Zip Code

48178-9174

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director - Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR82493742299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Piyush J Desai

Mailing Address 3620 Beechtree Ln

City

Okemos

State

MI

Zip Code

48864-3864

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR82494012299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1104.00

TOTAL This Period (last page this line number only)

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

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(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

A.

Full Name (Last, First, Middle Initial)

Paul S Nehls

Mailing Address 1654 Delmonte

City

Walled Lake

State

MI

Zip Code

48390-1921

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Finance Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824947722299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Patricia A Fritsch

Mailing Address 37149 Weymouth

City

Livonia

State

MI

Zip Code

48152-4095

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824950722299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Audrey J Harvey

Mailing Address 25465 Waycross

City

Southfld

State

MI

Zip Code

48034-2206

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP & Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824951322299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

972.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 100 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Kenneth A Bluhm

Mailing Address 6187 Brittany Tree

City

Troy

State

MI

Zip Code

48085-1085

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824951922299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Valerie L Keesee

Mailing Address 3400 E Coon Lake Rd

City

Howell

State

MI

Zip Code

48843-9420

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824954122299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Diana M Glaab

Mailing Address 24805 Belton Ln

City

Dearbn Hts

State

MI

Zip Code

48127-1377

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Auto National Fin Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824955522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 101 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Daniel Mroz

Mailing Address 17094 Euclid

City

Allen Pk

State

MI

Zip Code

48101-2827

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Financial Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824955622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Dominick A Mitchell III

Mailing Address 41500 Ladywood Ct

City

Northville

State

MI

Zip Code

48167-2342

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824959122299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ronald Wood

Mailing Address 29225 Lake Park

City

Frmgtn Hls

State

MI

Zip Code

48331-2661

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824959722299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1104.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 102 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Scott Eicher

Mailing Address 3355 Essex Ct

City

Troy

State

MI

Zip Code

48084-2722

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824961722299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Curtis J Schoenjahn

Mailing Address 3660 Seney Dr

City

Lake Orion

State

MI

Zip Code

48360-2706

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824962222299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Kenneth L Krisan

Mailing Address 1921 Dogwood Trail

City

Walled Lk

State

MI

Zip Code

48390-3914

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824963922299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1044.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 103 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Michael A Ross

Mailing Address 43913 Palisades

City

Canton

State

MI

Zip Code

48187-3222

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824965022299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Diane M Wolfenden

Mailing Address 34397 Orsini Dr.

City

Sterling Heights

State

MI

Zip Code

48312-5773

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director - Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824967822299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

John J Dunn

Mailing Address 3153 Davenport

City

Rochester Hills

State

MI

Zip Code

48309-4283

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
VP Corporate Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824968522299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1104.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 104 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Erika Monroe

Mailing Address 15531 Brookstone Dr

City

Clinton Township

State

MI

Zip Code

48035-1060

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Dir Actuarial Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR824970322299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Cheri A Lehto

Mailing Address 4051 Wakefield Rd

City

Berkley

State

MI

Zip Code

48072-1409

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR824971122299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Laurie Ann McIntee

Mailing Address 3356 S. Blvd., E.

City

Blmfld Hls

State

MI

Zip Code

48304-1155

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Senior Health Care Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR824971522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

648.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 105 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Ronald E Branch

Mailing Address 29225 Sunridge

City

Farmington Hills

State

MI

Zip Code

48334-4012

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSMOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR824971722299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Marilyn J Smith

Mailing Address 2485 Kimberly Fair

City

Rochester Hills

State

MI

Zip Code

48309-2061

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSMOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR824971922299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

James D Mills

Mailing Address 37753 Chase Ct

City

Livonia

State

MI

Zip Code

48150-5040

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSMOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR824972422299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1044.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 106 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Claudia J Swink

Mailing Address 4459 Forest Ave

City

Waterford

State

MI

Zip Code

48328-1113

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR82497322299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Cynthia E Dion

Mailing Address 41584 Stonehenge Manor

City

Clinton Township

State

MI

Zip Code

48038-4642

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Sr Dir Human Performance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR82497332299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Debra S Ross

Mailing Address 1148 Jenna Dr

City

Davison

State

MI

Zip Code

48423-3608

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR82497382299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 107 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Beverly J Lentz

Mailing Address 1921 Vineway
Unit 35

City State Zip Code
Canton MI 48188-1852

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824973922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Laura S Dancsok

Mailing Address 8253 Colony Dr
#22

City State Zip Code
Grosse Ile MI 48138-1733

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager-Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824974222299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Rodney Ross

Mailing Address 1345 W Long Lake Rd

City State Zip Code
Bloomfield Hills MI 48302-1336

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824978422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

648.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 108 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Cathy M Longo

Mailing Address 30790 Plum Lane

City

Madison Hts

State

MI

Zip Code

48071-1504

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824979122299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Nita E Firestone

Mailing Address 7737 Collingwood

City

Brighton

State

MI

Zip Code

48114-9459

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824980622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Kimberly A Meisel

Mailing Address 19820 Fry

City

Northville

State

MI

Zip Code

48167-2632

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824983422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Mark J Giroux

Mailing Address 2127 Woodland Ave

City

Royal Oak

State

MI

Zip Code

48073-3876

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824990722299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Beth D Benson

Mailing Address 15860 Reedmere Ave

City

Beverly Hills

State

MI

Zip Code

48025-5672

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824991822299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Wesley Shasko

Mailing Address 43828 Nowland Dr

City

Canton

State

MI

Zip Code

48188-1794

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824993222299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Jennifer E Nosakowski

Mailing Address 1377 Morning Mist Dr

City

Howell

State

MI

Zip Code

48843-7012

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824996922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Kimberley C Bracej

Mailing Address 2697 Ferry Park

City

Detroit

State

MI

Zip Code

48208-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR824997322299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Patricia A Slisinger

Mailing Address 34518 Morningdale Dr

City

Strlg Hts

State

MI

Zip Code

48312-5744

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825004222299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

648.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Peggy S Gunns

Mailing Address 722 E Columbia St

City

Mason

State

MI

Zip Code

48854-1306

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825005522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Anthony Joseph Russo

Mailing Address 23003 Brookdale

City

St Clr Sh

State

MI

Zip Code

48082-2138

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825006022299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Seth A Crawford

Mailing Address 28736 Stonewall Court

City

Novi

State

MI

Zip Code

48377-2720

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
VP Rating & Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825011222299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

972.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Lisa R Susin

Mailing Address 42746 Bloomingdale

City

Sterling Heights

State

MI

Zip Code

48314-2843

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825011522299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Chris J Maier

Mailing Address 6061 Middle Lake Rd

City

Clarkston

State

MI

Zip Code

48346-2047

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
VP Claims & Enrollment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825018922299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Patricia A Bojicic

Mailing Address 29223 Glencastle Court

City

Frmgtn Hls

State

MI

Zip Code

48336-1416

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825019022299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1236.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Sean M Drate

Mailing Address 722 Albany

City

Ferndale

State

MI

Zip Code

48220-1829

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825019122299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Theodore F Pierzchala

Mailing Address 6046 Meadowgreene

City

Waterford Twp

State

MI

Zip Code

48327-2943

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Team Leader II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825023822299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Renee M Rabideau

Mailing Address 1699 S Shore Dr

City

Rochester Hills

State

MI

Zip Code

48307-4314

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825025122299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Brenda A Selle

Mailing Address 11305 Cemetery Rd

City

Erie

State

MI

Zip Code

48133-9734

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825027722299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Kirk W Vogelei

Mailing Address 1304 Kinlock

City

Troy

State

MI

Zip Code

48098-2041

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825028322299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Diane L Flint

Mailing Address 14240 Talbot

City

Oak Park

State

MI

Zip Code

48237-1183

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825028522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

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for each category of the
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Kimberly A Jones-Schneider

Mailing Address 1219 Chelsea Blvd

City

Oxford

State

MI

Zip Code

48371-6729

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825033522299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Cynthia Aldrich

Mailing Address 14239 Cardwell St

City

Livonia

State

MI

Zip Code

48154-4651

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825037822299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Adrienne Savage

Mailing Address 25019 Woodridge Triangle

City

Farmington Hills

State

MI

Zip Code

48335-2053

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825048122299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 116 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Susan M Crowley

Mailing Address 31 Beacon Hill

City

Gross Pointe Farms

State

MI

Zip Code

48236-3001

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825049722299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Shlynn T Rhodes

Mailing Address 854 Delray Se

City

Gd Rapids

State

MI

Zip Code

49546-2329

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825059322299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Cynthia A Lewis

Mailing Address 14210 Houghton

City

Livonia

State

MI

Zip Code

48154-5900

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Consultant - Lean

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825059622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Peter G Albert

Mailing Address 30711 Delton

City

Madison Hts

State

MI

Zip Code

48071-2109

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825063722299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Ray A Warner

Mailing Address 50707 Otter Creek

City

Shelby Twp

State

MI

Zip Code

48317-1751

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825068322299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Michael K Jennings II

Mailing Address 23682 Paddock Dr

City

Farmington Hills

State

MI

Zip Code

48336-2226

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825074922299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Brenton D Henderson

Mailing Address 1868 Woodmont Ct.

City

Canton

State

MI

Zip Code

48188-1644

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825075322299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Harry I Nowell III

Mailing Address 598 Longfellow Dr

City

Troy

State

MI

Zip Code

48085-4815

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825076722299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

David T Casillas

Mailing Address 3020 Syracuse

City

Dearborn

State

MI

Zip Code

48124-4527

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825077422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

648.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 119 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Dean H Swanson

Mailing Address 86 Webb St

City

Troy

State

MI

Zip Code

48098-4632

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSMOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825077922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Lablance B Winder

Mailing Address 32001 Concord Dr
Apt G

City

Madison Hts

State

MI

Zip Code

48071-1231

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSMOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825079422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Catherine M Sinning

Mailing Address 25232 Surrey Lane

City

Frmgtn Hls

State

MI

Zip Code

48335-2041

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSMOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825084322299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 120 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Debra A Trezil

Mailing Address 12405 Sunview Ct

City

S Lyon

State

MI

Zip Code

48178-8166

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825084922299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Tonja M Poole

Mailing Address 636 Watersedge Dr.

City

Ann Arbor

State

MI

Zip Code

48105-2515

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Compensation Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825086522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Roy E Nesler

Mailing Address PO Box 871159

City

Canton

State

MI

Zip Code

48187-6159

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825089022299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 121 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Kathryn W Woodyard

Mailing Address 5069 Glendurgan Ct

City

Holt

State

MI

Zip Code

48842-9439

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825090122299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Karen E Anderson

Mailing Address 47610 Red Run Dr

City

Canton

State

MI

Zip Code

48187-5490

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825091422299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Pamela A Krause

Mailing Address 121E Parent Ave

City

Royal Oak

State

MI

Zip Code

48067-3726

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825092522299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 122 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Lisa J O'Higgins

Mailing Address 8062 Racine Rd

City

Warren

State

MI

Zip Code

48093-2308

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR82509262299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Dell M Dexter

Mailing Address 10745 Duprey

City

Detroit

State

MI

Zip Code

48224-1296

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR82509282299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Jacqueline M Dannis

Mailing Address 25111 W 13 Mile Rd

City

Franklin

State

MI

Zip Code

48025-2307

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director Organizational Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR82509312299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 123 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Kathleen A Popiela

Mailing Address 36365 Parklane Circle

City

Farmington

State

MI

Zip Code

48335-4210

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Strategy Perf Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825093922299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Nancy E Bennett

Mailing Address 24121 Rosewood

City

Oak Park

State

MI

Zip Code

48237-2271

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825095922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Daniel R Daly

Mailing Address 3299 Jasper Ct

City

Troy

State

MI

Zip Code

48083-5780

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825097022299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 124 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Cathy Mozham

Mailing Address 20741 Country Oaks

City

Wyandotte

State

MI

Zip Code

48192-7958

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825098222299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Lloyd L Banks

Mailing Address 5371 Kingsfield Dr

City

W Bloomfield

State

MI

Zip Code

48322-1457

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825098622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Lisa M Hoomaian

Mailing Address 24429 Holyoke Ct

City

Novi

State

MI

Zip Code

48374-2853

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager Sales Infrm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825100722299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 125 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Susan C Tousignant

Mailing Address 21620 River Ridge Trail

City

Farmington Hills

State

MI

Zip Code

48335-4621

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825102522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Robert L Tripi

Mailing Address 16757 Dunswood Dr

City

Northville

State

MI

Zip Code

48167-2357

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825103422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ronda S Ralston

Mailing Address 718 West Dexter Trail

City

Mason

State

MI

Zip Code

48854-8606

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager-Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825104922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

648.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 126 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Gretchen M White

Mailing Address 4165 Dallas

City

Holt

State

MI

Zip Code

48842-1735

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager-Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825105022299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Trine J Martinez

Mailing Address 43585 Serenity Dr.

City

Northville

State

MI

Zip Code

48167-8932

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager-Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825106422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

David R Watroba

Mailing Address P.O. Box 601

City

Northville

State

MI

Zip Code

48167-0601

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director - Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825110822299

Amount of Each Receipt this Period

261.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

693.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 127 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Arva M Overton

Mailing Address 37404 Legends Trail Dr

City

Farmington Hills

State

MI

Zip Code

48331-1158

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager-Key Account

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825111222299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Barbara A Murphy

Mailing Address 3404 Park Forest Drive

City

W Blmfld

State

MI

Zip Code

48324-3233

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director - Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825111822299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Robert E Reynolds

Mailing Address 314 Hillcrest Ave

City

Grs Pt Fms

State

MI

Zip Code

48236-3116

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager-Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825113722299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 128 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Marcia E Moore

Mailing Address 49405 Oxley Rd

City

Macomb

State

MI

Zip Code

48044-1520

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager-Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825113922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Sharon L Brock

Mailing Address 360 Holford St

City

River Rouge

State

MI

Zip Code

48218-1152

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825114222299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Beverly M Lamb-Stovall

Mailing Address 5711 Branford Dr

City

W Bloomfield

State

MI

Zip Code

48322-1123

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director - Regional Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825114422299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 129 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Pamela A Yanis

Mailing Address 905 Blairmoor Ct

City

State

Zip Code

Grs Pt Wds

MI

48236-1244

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825115222299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Sandra Fester

Mailing Address 44431 Gibson Dr

City

State

Zip Code

Sterling Hts

MI

48313-9999

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director - Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825116722299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Sharon R Oneill

Mailing Address 7228 Gully

City

State

Zip Code

Dearbn Hts

MI

48127-3807

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825119622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 130 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Margaret T Anthony

Mailing Address 4451 Golfview Dr

City

Brighton

State

MI

Zip Code

48116-9186

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825130222299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Brenda J Saulters

Mailing Address 17373 Runyon Avenue

City

Detroit

State

MI

Zip Code

48234-3820

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Sr. Auditor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825135522299

Amount of Each Receipt this Period

232.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Constance M Blachut

Mailing Address 787 Deer Court

City

Plymouth

State

MI

Zip Code

48170-1743

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825135622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

988.00

TOTAL This Period (last page this line number only)

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

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

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(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

A.

Full Name (Last, First, Middle Initial)

Laura J OConnor

Mailing Address 38966 Mt Kisco

City

Sterling Heights

State

MI

Zip Code

48310-3222

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825139622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Craig B Millard

Mailing Address 1072 Blue Ridge Drive

City

Clarkston

State

MI

Zip Code

48348-4091

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Technology Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825139722299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Susan J Rubin

Mailing Address 41460 Belden Circle

City

Novi

State

MI

Zip Code

48377-1546

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825140222299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

648.00

TOTAL This Period (last page this line number only)

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

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

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(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

A.

Full Name (Last, First, Middle Initial)

B. George Kuljurgis

Mailing Address 5587 Springwater Lane

City

W Blmfld

State

MI

Zip Code

48322-1749

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825143722299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Jeffrey S Rubleski

Mailing Address 4045 Forest Point Dr

City

Muskegon

State

MI

Zip Code

49441-4680

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director - Regional Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825152222299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Michael A Momrik

Mailing Address 15504 Oak Hollow Drive

City

Holly

State

MI

Zip Code

48442-9524

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager-Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825153322299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 133 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Sophia C Quinn

Mailing Address 241 Tuscany Dr

City

State

Zip Code

Portage

MI

49024-9109

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager-Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825154522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Michelle M VanTorre-Tellier

Mailing Address 2065 Wilshire Dr SE

City

State

Zip Code

Grand Rapids

MI

49506-4013

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager-Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825154822299

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Suzanne M Kiester

Mailing Address 11512 Aspen Dr

City

State

Zip Code

Plymouth

MI

48170-4597

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825160022299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

672.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 134 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Teresa L Bueche

Mailing Address 7144 Shalimar Dr NE

City

Comstock Park

State

MI

Zip Code

49321-9644

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSMOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825161422299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Sheryl F Lowe

Mailing Address 4899 Peggy St

City

W Blmfld

State

MI

Zip Code

48322-4446

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSMOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825162922299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Susan L Barkell

Mailing Address 8171 Brookville Rd

City

Plymouth

State

MI

Zip Code

48170-5005

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSMOccupation
VP Grp Servg & Prov Servs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825163222299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1236.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 135 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Denise Turman

Mailing Address 19532 Bretton Drive

City

Detroit

State

MI

Zip Code

48223-1269

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825166522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Juanita E Savage

Mailing Address 25646 Castlereigh Dr

City

Farmington Hls

State

MI

Zip Code

48336-1523

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825171722299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

George P Gopoian

Mailing Address 25437 Witherspoon

City

Frmgtn Hls

State

MI

Zip Code

48335-1368

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Associate Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825172722299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 136 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Asir U Ahmad

Mailing Address 1935 Hillwood Drive

City

Bloomfield Hills

State

MI

Zip Code

48304-2420

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Physician Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825173422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Michelle C Fullerton

Mailing Address 23528 Fordson

City

Dearborn

State

MI

Zip Code

48124-1602

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825175622299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Gary W Dusute

Mailing Address 29762 Bayview

City

Grosse Ile

State

MI

Zip Code

48138-1902

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825183922299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

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

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(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

A.

Full Name (Last, First, Middle Initial)

Glen A Perry

Mailing Address 2148 Michele Dr

City

Troy

State

MI

Zip Code

48085-3825

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825184222299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Michael C Strampel

Mailing Address 13140 Addington Dr

City

Dewitt

State

MI

Zip Code

48820-8186

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Clinical Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825186122299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Patricia M Wilson

Mailing Address 597 Dresden Place

City

St Clr Bch

State

ON

Zip Code

N8N 4-B6

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825186722299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 138 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Jeffrey A Holzhausen

Mailing Address 2675 Ambassador Dr

City

Ypsilanti

State

MI

Zip Code

48198-1028

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825186922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Kevin L Kihn

Mailing Address 10529 Stark

City

Livonia

State

MI

Zip Code

48150-2619

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825202022299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Suzette M Felling

Mailing Address 1966 Hunters Ridge

City

Blmfld Hls

State

MI

Zip Code

48304-1036

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825209822299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

648.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 139 / 223

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Diane K Valade

Mailing Address 12927 LaSalle Ln

City

Huntington Woods

State

MI

Zip Code

48070-1045

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825211422299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Amy K Hunter

Mailing Address 22 Kenberton Dr

City

Pleasant Ridge

State

MI

Zip Code

48069-1014

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Associate Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825212222299

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Thomas J Ruane

Mailing Address 26509 Old Homestead Ct

City

Farmington Hills

State

MI

Zip Code

48331-3851

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825212822299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

936.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 140 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Thelma J Caison-Sorey

Mailing Address 4253 Sedgemoor Lane

City

Bloomfield Hills

State

MI

Zip Code

48302-1648

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Associate Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825212922299

Amount of Each Receipt this Period

360.00

P/R Deduction (\$30.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Susan P Bayless

Mailing Address 4722 Heather Ln

City

Bloomfld

State

MI

Zip Code

48301-1410

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825213022299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Kerri L Larkin

Mailing Address 21882 Chase Dr

City

Novi

State

MI

Zip Code

48375-4766

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825213622299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

792.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 141 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Marcia N Persin

Mailing Address 5274 Pond Bluff Drive

City

W Blmfld

State

MI

Zip Code

48323-2442

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825261222299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Bethany Bump-White

Mailing Address 31634 Iris Ct

City

Rockwood

State

MI

Zip Code

48173-8766

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825268422299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Robert H Digby

Mailing Address 4125 Naubinway Rd

City

Okemos

State

MI

Zip Code

48864-3424

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Physician Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825268622299

Amount of Each Receipt this Period

300.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

864.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 142 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Beth L Rubin

Mailing Address 4408 Westover Drive

City

W Bloomfield

State

MI

Zip Code

48323-2874

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Physician Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825270422299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Kevin L Seitz

Mailing Address 4342 Thoreson

City

Maple City

State

MI

Zip Code

49664-8766

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

EVP Hlth Care Value Enhancemnt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825273022299

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Lisa S DeMoss

Mailing Address 5025 Stonehenge Dr

City

Rochester

State

MI

Zip Code

48306-2654

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

SVP General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825273622299

Amount of Each Receipt this Period

240.00

P/R Deduction (\$60.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1308.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 143 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Kim E Sorget

Mailing Address 620 Hollywood Ave

City

State

Zip Code

Grs Pt Wds

MI

48236-1319

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Prov Cont & Ntwk Admin

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825273822299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Jeanne H Carlson

Mailing Address 30847 Palmer Dr

City

State

Zip Code

Novi

MI

48377-4520

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

SVP Subsidiary Operations

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825274222299

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Michele A Samuels

Mailing Address 29203 Bradmoor Ct

City

State

Zip Code

Farmington Hills

MI

48334-3270

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Gnrl Aud & Corp Compli

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825274422299

Amount of Each Receipt this Period

1200.00

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

2460.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 144 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Mark R Bartlett

Mailing Address 49546 Hollywood Dr

City

Canton

State

MI

Zip Code

48187-1162

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

EVP CFO & Pres Emerg Mkts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825274622299

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Robert W Kasperek

Mailing Address 34796 Bretton

City

Livonia

State

MI

Zip Code

48152-4047

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Deputy Gen Cnsl Reg Aff

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825274822299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Michelle L Gaggini

Mailing Address 18515 Country Club Ct.

City

Riverview

State

MI

Zip Code

48192-8161

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Federal Business Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825275522299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1800.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 145 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Ira Strumwasser

Mailing Address 5076 Scio Church Rd

City

Ann Arbor

State

MI

Zip Code

48103-9636

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP BCBSM Foundation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825276022299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

John G Fitzpatrick

Mailing Address 44491 Wright Way

City

Novi

State

MI

Zip Code

48375-1549

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Autos

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825276322299

Amount of Each Receipt this Period

495.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Allan G O'Dacre

Mailing Address 3420 Andora Dr

City

Superior Twp

State

MI

Zip Code

48198-9659

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Medicare Adv Tech Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825276422299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1575.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 146 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Thomas L Simmer

Mailing Address 4975 S Ridgeside Circle

City

Ann Arbor

State

MI

Zip Code

48105-9447

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

SVP & Chief Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825276522299

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Daniel J Loepp

Mailing Address 1720 Washington Blvd

City

Birmingham

State

MI

Zip Code

48009-1918

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825276622299

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Greg T Vartanoff

Mailing Address 22359 Woodstock Ct

City

Woodhaven

State

MI

Zip Code

48183-3116

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825276822299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1788.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 147 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Laura S Marble

Mailing Address 1880 Golf Ridge Dr S

City

Bloomfield Townshi

State

MI

Zip Code

48302-1737

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP MI Delivery System&Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825276922299

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Anika Heideman

Mailing Address 622 Graefield Ct

City

Birmingham

State

MI

Zip Code

48009-5843

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825355222299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Kevin W Holloway

Mailing Address 5915 Cartago Dr

City

Lansing

State

MI

Zip Code

48911-6480

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager Pharmacy Administratio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825380822299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1152.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 148 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Joseph J Andraska

Mailing Address 2220 Tilsby Ct

City

Ann Arbor

State

MI

Zip Code

48103-6160

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Mgr Finance/Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825381822299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Andrew McCallum

Mailing Address 25823 Groveland Ln

City

Novi

State

MI

Zip Code

48374-2353

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Dir Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825383122299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Matt Forney

Mailing Address 1086 Ravensview Trl

City

Milford

State

MI

Zip Code

48381-2972

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

BCN Market Relations Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825385922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 149 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Jeanette Johnson

Mailing Address 29726 Somerset

City

Southfield

State

MI

Zip Code

48076-1871

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Strategic Anal Prjt Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825386922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Kathleen E Young

Mailing Address 1217 Naples Court

City

Ann Arbor

State

MI

Zip Code

48103-5314

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Dir Med Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825400322299

Amount of Each Receipt this Period

240.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Pamela S Reinert

Mailing Address 661 Plantation Drive

City

Saginaw

State

MI

Zip Code

48603-7162

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Sr Advisor Quality Improvement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825402022299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

672.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 150 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Mary A Ellison

Mailing Address 25308 Shiawassee Circle
Unit 109

City State Zip Code
Southfld MI 48034-3826

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825402522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Patricia A Palczewski

Mailing Address 28476 Selkirk St

City State Zip Code
Southfield MI 48076-3058

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager Medical Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825413922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

William C Granger

Mailing Address 7201 Cuesta Way Drive

City State Zip Code
Rockford MI 49341-9495

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Regional Med Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825418822299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 151 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Jeanne M Cavanaugh

Mailing Address 521 Leroy St

City

Ferndale

State

MI

Zip Code

48220-3300

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager Pharmacy Administratio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825419922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Janet A Jennings

Mailing Address 8120 E. Jefferson
#7d

City

Detroit

State

MI

Zip Code

48214-2665

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Dir Medical Informatics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825421122299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Nancy S Mamo

Mailing Address 2560 Birchwood Dr

City

Howell

State

MI

Zip Code

48855-7665

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Mgr Medical Informatics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825421822299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 152 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Mary V Driessche

Mailing Address 6026 Meadowlark

City

Rockford

State

MI

Zip Code

49341-9221

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825422822299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Carla M Chambers

Mailing Address 39660 Dun Rovin Dr

City

Northville

State

MI

Zip Code

48168-4301

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
VP Hlth & Medical Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825426422299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Leslie A James

Mailing Address 528 Woodhaven Dr

City

Commerce Township

State

MI

Zip Code

48390-5805

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Dir Customer Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825428022299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1236.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 153 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Yolanda F Smith

Mailing Address 27545 Gateway Dr N
Apt 107

City State Zip Code
Farmington Hills MI 48334-4935

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825430822299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Dana R Taylor

Mailing Address 27817 Independence St Apt 2021

City State Zip Code
Farmington Hills MI 48336-6073

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825431922299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Sharon L Heath

Mailing Address 28345 Carlton Way Dr

City State Zip Code
Novi MI 48377-2635

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Dir Devel & Svc Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825432122299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 154 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Adonna M. Mcfall

Mailing Address PO Box 3895

City

Southfield

State

MI

Zip Code

48037-3895

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Manager Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825432822299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Nancy L Dewan

Mailing Address 6336 Thurber Rd

City

Bloomfield Hills

State

MI

Zip Code

48301-1525

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Dir Bus Devel & Prod Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825435222299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Robert T Hopper

Mailing Address 40671 La Grange Dr

City

Sterling Heights

State

MI

Zip Code

48313-4340

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825435522299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 155 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Jack N Pitts

Mailing Address 6194 Forest Grove

City

West Bloomfield

State

MI

Zip Code

48322-1300

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825436322299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Patricia A Stone

Mailing Address 3377 Dewdrop Lane

City

Howell

State

MI

Zip Code

48843-7380

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825439122299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Jennifer Bussone

Mailing Address 28121 Forestbrook Dr

City

Farmington Hills

State

MI

Zip Code

48334-5210

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Assoc Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825441022299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

912.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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(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

A.

Full Name (Last, First, Middle Initial)

Carmi E Edwards Jr

Mailing Address 5415 Blossom Ln

City

Linden

State

MI

Zip Code

48451-8984

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825441222299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Renee E Cords

Mailing Address 16001 Riverside ST

City

Livonia

State

MI

Zip Code

48154-2460

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Strategic Anal Prjt Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825441522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Lisa M Hardy

Mailing Address 1705 Brian Ct

City

Ann Arbor

State

MI

Zip Code

48104-4267

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Dir Bus Planning & Prod Devlp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825441622299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 157 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Catherine A Murphy

Mailing Address 1911 Bacon Ave

City

Berkley

State

MI

Zip Code

48072-1063

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Dir Memb & Prov Acctg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825443522299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Elizabeth A Geis

Mailing Address 1392 Ludean

City

Highland

State

MI

Zip Code

48356-1168

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Dir Medicare & Exec Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825443622299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Diane L Bridgeman

Mailing Address 687 Chestnut Dr

City

Wixom

State

MI

Zip Code

48393-4304

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Dir Clinical Program Oper

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825443722299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1044.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 158 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Joseph M Bojman

Mailing Address 15971 Jeanette

City

Southfld

State

MI

Zip Code

48075-2012

FEC ID number of contributing
federal political committee.**C**Name of Employer
BCBSMOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825444722299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Philip D Briskin

Mailing Address 523 Wilcox St

City

Rochester

State

MI

Zip Code

48307-1443

FEC ID number of contributing
federal political committee.**C**Name of Employer
BCBSMOccupation
Manager Finance Shared Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825449822299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Joan M Morehead

Mailing Address 4240 Sebring Ln

City

White Lake

State

MI

Zip Code

48383-1381

FEC ID number of contributing
federal political committee.**C**Name of Employer
BCBSMOccupation
VP BCN Corp & Fin Svcs Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825464122299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

972.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 159 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Sandra D Boozer

Mailing Address 4562 Apple Tree Court

City

W Blmfld

State

MI

Zip Code

48323-3910

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825464222299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Gail Ross

Mailing Address 322 E Harrison Ave
Unit 26

City

Royal Oak

State

MI

Zip Code

48067-3284

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825464322299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Elana S Kozik

Mailing Address 13109 Vernon

City

Hunting Wds

State

MI

Zip Code

48070-1451

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Prod/Proc Improvement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825464422299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1620.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 160 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Susan A Kluge

Mailing Address 10795 Stoney Point Dr

City

South Lyon

State

MI

Zip Code

48178-9820

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

SVP & CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825464622299

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Kevin J Klobucar

Mailing Address 7299 Talonna Trl

City

Fowlerville

State

MI

Zip Code

48836-8263

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Prod & Mkt Regional Exec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825464722299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Alison D Pollard

Mailing Address 170 Orchard St

City

Chelsea

State

MI

Zip Code

48118-1052

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Provider Affiliation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR825464822299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1800.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 161 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Carl E Siebers

Mailing Address 232 Quail Ridge

City

Ada

State

MI

Zip Code

49301-8778

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP Claims Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825464922299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Douglas R Woll

Mailing Address 3311 Woodview Lake Rd

City

W Blmfld

State

MI

Zip Code

48323-3573

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

SVP & Chief Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825465022299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$60.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

David R Nelson

Mailing Address 23928 Devonshire Dr

City

Novi

State

MI

Zip Code

48374-3758

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

VP and Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825465322299

Amount of Each Receipt this Period

720.00

P/R Deduction (\$60.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

1800.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 162 / 223

(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

A.

Full Name (Last, First, Middle Initial)

Marc D Keshishian

Mailing Address 30498 Fox Club Dr

City

Farmington Hills

State

MI

Zip Code

48331-1956

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

SVP & Chief Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR825465522299

Amount of Each Receipt this Period

540.00

P/R Deduction (\$45.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Tammy Richison

Mailing Address 606 E Greenlawn

City

Lansing

State

MI

Zip Code

48910

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accident Fund Insurance
Company of Ame

Occupation

TPA Team Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR838645822299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Kathleen M Garman

Mailing Address 1627 Devonwood

City

Rochester Hills

State

MI

Zip Code

48306-3107

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR905714722299

Amount of Each Receipt this Period

228.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

984.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 163 / 223

(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

A.

Full Name (Last, First, Middle Initial)

James P Bobak

Mailing Address 7199 Quail Run St

City

Temperance

State

MI

Zip Code

48182-1363

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR919827522299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

David B Keener

Mailing Address 823 W Oakridge

City

Ferndale

State

MI

Zip Code

48220-2753

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR931671122299

Amount of Each Receipt this Period

216.00

P/R Deduction (\$18.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Daniel N Martin

Mailing Address 1447 W Hazelhurst St

City

Ferndale

State

MI

Zip Code

48220-3121

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSM

Occupation
Dir Provider Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: PR931671922299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 164 / 223

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Orin M Lewis

Mailing Address 5827 Applewood
Apt 802

City	State	Zip Code
West Bloomfield	MI	48322-3479

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCBSMOccupation
Dir Customer Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	9

Transaction ID: PR931673322299

Amount of Each Receipt this Period

348.00

P/R Deduction (\$29.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

348.00

TOTAL This Period (last page this line number only)

152800.84

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 165 / 223

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) America's Leadership PAC	Transaction ID: 30303967 Date of Disbursement																				
Mailing Address 607 14th Street NW Suite 800	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	0		2	0	0	9												
City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contributions to Federal PACs Candidate Name	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Peters for Congress	Transaction ID: 30304012 Date of Disbursement																				
Mailing Address PO Box 226	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	9		2	0	0	9												
City Bloomfield Hills State MI Zip Code 48303	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution to Federal Candidates Candidate Name Gary Peters	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 09	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Peters for Congress	Transaction ID: 30304271 Date of Disbursement																				
Mailing Address PO Box 226	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	9		2	0	0	9												
City Bloomfield Hills State MI Zip Code 48303	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution to Federal Candidates Candidate Name Gary Peters	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 09	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

John D Dingell For Congress Committee

Mailing Address 607 Fourteenth Street Nw

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
Contribution to Federal Candidates

011

Category/
Type

Candidate Name
Rep. John Dingell

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 16

Transaction ID: 30304432

Date of Disbursement

03 / 24 / 2009

Amount of Each Disbursement this Period

2500.00

Contribution to Federal
Candidates

B.

Full Name (Last, First, Middle Initial)

Levin For Congress Committee

Mailing Address P.O. Box 1092

City
Warren

State
MI

Zip Code
48092

Purpose of Disbursement
Contribution to Federal Candidates

011

Category/
Type

Candidate Name
Rep. Sander Levin

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 12

Transaction ID: 30304648

Date of Disbursement

06 / 10 / 2009

Amount of Each Disbursement this Period

1500.00

Contribution to Federal
Candidates

C.

Full Name (Last, First, Middle Initial)

Schauer For Congress

Mailing Address PO Box 100

City
Battle Creek

State
MI

Zip Code
49016

Purpose of Disbursement
Contribution to Federal Candidates

011

Category/
Type

Candidate Name
Mr. Mark Schauer

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 07

Transaction ID: 30304856

Date of Disbursement

03 / 25 / 2009

Amount of Each Disbursement this Period

2500.00

Contribution to Federal
Candidates

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Schauer For Congress	Transaction ID: 30305120 Date of Disbursement																				
Mailing Address PO Box 100	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		3	0		2	0	0	9												
City Battle Creek State MI Zip Code 49016	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution to Federal Candidates	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Mr. Mark Schauer	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 07	Contribution to Federal Candidates																				
B. Full Name (Last, First, Middle Initial) Stupak for Congress	Transaction ID: 30305364 Date of Disbursement																				
Mailing Address 817 9th Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	6		2	0	0	9												
City Menominee State MI Zip Code 49858	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution to Federal Candidates	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Bart Stupak	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 00	Contribution to Federal Candidates																				
C. Full Name (Last, First, Middle Initial) Wolverine PAC	Transaction ID: 30305599 Date of Disbursement																				
Mailing Address 607 14th Street NW Ste 800	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution to Federal Candidates	<table border="1"> <tr> <td>2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Candidate Name Wolverine PAC	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Contribution to Federal Candidates																				

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Candice Miller for Congress

Mailing Address P.O. Box 791

City

Mt. Clemens

State

MI

Zip Code

48046

Purpose of Disbursement

Contribution to Federal Candidates

Candidate Name

Candice Miller

011

Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For:

2010

☒

Primary

☐

General

☐

Other (specify) ▼

State: MI

District: 00

Transaction ID: 30306410

Date of Disbursement

06

22

20

09

Amount of Each Disbursement this Period

2500.00

Contribution to Federal
Candidates

B.

Full Name (Last, First, Middle Initial)

Dave Camp For Congress

Mailing Address 5915 Eastman Ave. Suite 100
5915 Eastman Ave. Suite 100

City

Midland

State

MI

Zip Code

48640

Purpose of Disbursement

Contribution to Federal Candidates

Candidate Name

Rep. Dave Camp

011

Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For:

2010

☒

Primary

☐

General

☐

Other (specify) ▼

State: MI

District: 04

Transaction ID: 30306692

Date of Disbursement

02

25

20

09

Amount of Each Disbursement this Period

5000.00

Contribution to Federal
Candidates

C.

Full Name (Last, First, Middle Initial)

Mccotter Congressional Committee

Mailing Address P. O. Box 530788

City

Livonia

State

MI

Zip Code

48153

Purpose of Disbursement

Contribution to Federal Candidates

Candidate Name

Rep. Thaddeus McCotter

011

Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For:

2010

☒

Primary

☐

General

☐

Other (specify) ▼

State: MI

District: 11

Transaction ID: 30307232

Date of Disbursement

06

30

20

09

Amount of Each Disbursement this Period

1500.00

Contribution to Federal
Candidates

SUBTOTAL of Disbursements This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Rogers For Congress

Mailing Address Post Office Box 581
Post Office Box 581

City Brighton State MI Zip Code 48116

Purpose of Disbursement
Contribution to Federal Candidates

Candidate Name
Rep. Michael Rogers

Office Sought: ☒ House
☐ Senate
☐ President

State: MI District: 08

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 30307549

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Contribution to Federal
Candidates

B.

Full Name (Last, First, Middle Initial)

Democratic Senatorial Campaign Committee

Mailing Address 120 Maryland Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contributions to Federal PACs

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 30307841

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Contributions to Federal
PACs

C.

Full Name (Last, First, Middle Initial)

Stabenow For Us Senate

Mailing Address PO Box 4945

City East Lansing State MI Zip Code 48826

Purpose of Disbursement
In-Kind Contribution (Printing Labor & Cost)

Candidate Name
Sen. Debbie Stabenow

Office Sought: ☐ House
☒ Senate
☐ President

State: MI District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 30314853

Date of Disbursement

/ /

Amount of Each Disbursement this Period

In-Kind Contribution (Pri-
nting Labor & Cost)

SUBTOTAL of Disbursements This Page (optional)

3868.00

TOTAL This Period (last page this line number only)

38868.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

bluePAC

Mailing Address 1310 G. Street, N.W.

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
Contributions to Federal PACs

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 30308117

Date of Disbursement

04 / 03 / 2009

Amount of Each Disbursement this Period

10000.00

Contributions to Federal
PACs

B.

Full Name (Last, First, Middle Initial)

bluePAC

Mailing Address 1310 G. Street, N.W.

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
Contributions to Federal PACs

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 30308389

Date of Disbursement

05 / 26 / 2009

Amount of Each Disbursement this Period

15000.00

Contributions to Federal
PACs

C.

Full Name (Last, First, Middle Initial)

Robert A. Ficano Committee

Mailing Address PO Box 321123

City
Detroit

State
MI

Zip Code
48232

Purpose of Disbursement
Robert Ficano, Wayne County Exec. (Contribution to Local Candidate)

Candidate Name
Robert A Ficano

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2009

☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 30308598

Date of Disbursement

06 / 23 / 2009

Amount of Each Disbursement this Period

5000.00

Robert Ficano, Wayne County Exec. (Contribution to Local Candidate)

SUBTOTAL of Disbursements This Page (optional)

30000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
The Friends to Elect Diane Webb

Mailing Address 32262 Barton Street

City State Zip Code
Garden city MI 48135

Purpose of Disbursement
Diane Webb, County Commissioner MI (Contribution to Local Candidate)

Candidate Name
Diane Webb

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 30308994

Date of Disbursement

06 / 04 / 2009

Amount of Each Disbursement this Period

225.00

Diane Webb, County Commis-
sioner MI (Contribution
to Local Candidate)

B. Full Name (Last, First, Middle Initial)
Virg Bernero for Lansing

Mailing Address 2200 E. Michigan Ave.

City State Zip Code
Lansing MI 48912

Purpose of Disbursement
Virg Bernero, Mayor MI (Contribution to Local Candidate)

Candidate Name
Virg Bernero

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 30309237

Date of Disbursement

04 / 16 / 2009

Amount of Each Disbursement this Period

5000.00

Virg Bernero, Mayor MI
(Contribution to Local Ca-
ndidate)

C. Full Name (Last, First, Middle Initial)
John B. (Jack) O'Reilly Jr. Committee

Mailing Address PO Box 4521

City State Zip Code
Dearborn MI 48126

Purpose of Disbursement
Jack O'Reilly, Mayor MI (Contribution to Local Candidate)

Candidate Name
Jack O'Reilly, Jr.

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 30309341

Date of Disbursement

04 / 23 / 2009

Amount of Each Disbursement this Period

300.00

Jack O'Reilly, Mayor MI
(Contribution to Local Ca-
ndidate)

SUBTOTAL of Disbursements This Page (optional)

5525.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Burton Leland for Detroit

Mailing Address 17254 Bentler

City
Detroit

State
MI

Zip Code
48219

Purpose of Disbursement

Burton Leland, Wayne County Commissioner

Candidate Name
Burton Leland

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 30309759

Date of Disbursement

06 / 18 / 2009

Amount of Each Disbursement this Period

500.00

Burton Leland, Wayne County Commissioner

B.

Full Name (Last, First, Middle Initial)

Curtis Hertel Jr. for Register of Deeds

Mailing Address 1818 Cahill Drive

City
East Lansing

State
MI

Zip Code
48823

Purpose of Disbursement

Curtis Hertel, Register of Deeds Ingham County

Candidate Name
Curtis Hertel, Jr.

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 30311178

Date of Disbursement

05 / 14 / 2009

Amount of Each Disbursement this Period

250.00

Curtis Hertel, Register of Deeds Ingham County

C.

Full Name (Last, First, Middle Initial)

Committee to Elect Senita Lenear for Grand Rapids Board of Education

Mailing Address 1408 Madison Avenue, SE
Suite C

City
Grand Rapids

State
MI

Zip Code
49507

Purpose of Disbursement

Senita Lenear, Grand Rapids Board of Education MI

Candidate Name
Senita Lenear

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 30311179

Date of Disbursement

04 / 29 / 2009

Amount of Each Disbursement this Period

500.00

Senita Lenear, Grand Rapids Board of Education MI

SUBTOTAL of Disbursements This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Granholm Leadership fund	Transaction ID: 30311180 Date of Disbursement
Mailing Address 210 Brookstone Cir.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 8 / 2 0 0 9</div> </div>
City State Zip Code Dewitt MI 48820	Amount of Each Disbursement this Period
Purpose of Disbursement Contributions to State PACs/Independent Committees	<div>5000.00</div>
Candidate Name	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Contributions to State PA- Cs/Independent Committees
B. Full Name (Last, First, Middle Initial) Andy Dillon for State Representative	Transaction ID: 30311200 Date of Disbursement
Mailing Address 25302 W. Warren	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 8 / 2 0 0 9</div> </div>
City State Zip Code Dearborn Hts. MI 48127	Amount of Each Disbursement this Period
Purpose of Disbursement Andy Dillon, STATE HOUSE 76th MI	<div>3000.00</div>
Candidate Name Andy Dillon	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 76	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Andy Dillon, STATE HOUSE 76th MI
C. Full Name (Last, First, Middle Initial) Angerer Leadership Fund	Transaction ID: 30311328 Date of Disbursement
Mailing Address 568 Langfield	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 6 / 2 0 0 9</div> </div>
City State Zip Code Northville MI 48167	Amount of Each Disbursement this Period
Purpose of Disbursement Contributions to State PACs/Independent Committees	<div>1000.00</div>
Candidate Name	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Contributions to State PA- Cs/Independent Committees

SUBTOTAL of Disbursements This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Barb Byrum for State Representative

Mailing Address P.O. Box 27344

City Lansing State MI Zip Code 48909

Purpose of Disbursement
Barb Byrum, STATE HOUSE 67th MI

Candidate Name
Barb Byrum

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 67

Transaction ID: 30311355

Date of Disbursement

03 / 04 / 2009

Amount of Each Disbursement this Period

1000.00

Barb Byrum, STATE HOUSE
67th MI

B. Full Name (Last, First, Middle Initial)
Bob Constan for State Representative

Mailing Address 5527 Heather Lane

City Dearborn Hts. State MI Zip Code 48125

Purpose of Disbursement
Bob Constan, STATE HOUSE 16th MI

Candidate Name
Bob Constan

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 16

Transaction ID: 30311407

Date of Disbursement

04 / 01 / 2009

Amount of Each Disbursement this Period

500.00

Bob Constan, STATE HOUSE
16th MI

C. Full Name (Last, First, Middle Initial)
Citizens for Mike Simpson

Mailing Address P.O. Box 10

City Brooklyn State MI Zip Code 49230

Purpose of Disbursement
Mike Simpson, STATE HOUSE 65th MI

Candidate Name
MI Rep. Mike Simpson

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 65

Transaction ID: 30311408

Date of Disbursement

02 / 10 / 2009

Amount of Each Disbursement this Period

1000.00

Mike Simpson, STATE HOUSE
65th MI

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Citizens for Mike Simpson	Transaction ID: 30311409 Date of Disbursement																				
Mailing Address P.O. Box 10	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	1		2	0	0	9												
City Brooklyn State MI Zip Code 49230	Amount of Each Disbursement this Period																				
Purpose of Disbursement Mike Simpson, STATE HOUSE 65th MI	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name MI Rep. Mike Simpson	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 65	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Mike Simpson, STATE HOUSE 65th MI																				
B. Full Name (Last, First, Middle Initial) Coleman A. Young for Detroit	Transaction ID: 30311429 Date of Disbursement																				
Mailing Address 3430 E. Jefferson	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	3		2	0	0	9												
City Detroit State MI Zip Code 48207	Amount of Each Disbursement this Period																				
Purpose of Disbursement Coleman Young, STATE HOUSE 4th MI	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Coleman Young	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Coleman Young, STATE HOUSE 4th MI																				
C. Full Name (Last, First, Middle Initial) Coleman A. Young for Detroit	Transaction ID: 30311430 Date of Disbursement																				
Mailing Address 3430 E. Jefferson	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	3		2	0	0	9												
City Detroit State MI Zip Code 48207	Amount of Each Disbursement this Period																				
Purpose of Disbursement Coleman Young, STATE HOUSE 4th MI	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name Coleman Young	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Coleman Young, STATE HOUSE 4th MI																				

SUBTOTAL of Disbursements This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

CTE Harold Haugh State Representative #42

Mailing Address 19464 Candlelight

City
Roseville

State
MI

Zip Code
48066

Purpose of Disbursement

Harold Haugh, STATE HOUSE 42nd MI

Candidate Name
Harold Haugh

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 42

Transaction ID: 30311431

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

600.00

Harold Haugh, STATE HOUSE
42nd MI

B.

Full Name (Last, First, Middle Initial)

Committee to Elect Andrew J Kandrevas

Mailing Address 13400 Dix-Toledo Road

City
Southgate

State
MI

Zip Code
48195

Purpose of Disbursement

Andrew Kandrevas, STATE HOUSE 13th MI

Candidate Name
Andrew J Kandrevas

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 13

Transaction ID: 30311432

Date of Disbursement

03 / 31 / 2009

Amount of Each Disbursement this Period

500.00

Andrew Kandrevas, STATE
HOUSE 13th MI

C.

Full Name (Last, First, Middle Initial)

Committee to Elect David Nathan

Mailing Address 18701 Grand River
#270

City
Detroit

State
MI

Zip Code
48223

Purpose of Disbursement

David Nathan, STATE HOUSE 11th MI

Candidate Name
David Nathan

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 11

Transaction ID: 30311433

Date of Disbursement

03 / 04 / 2009

Amount of Each Disbursement this Period

600.00

David Nathan, STATE HOUSE
11th MI

SUBTOTAL of Disbursements This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

CTE Jimmy Womack for State Rep

Mailing Address 2310 W. McNichols Road

City State Zip Code
Detroit MI 48221

Purpose of Disbursement
Jimmy Womack, STATE HOUSE 7th MI

Candidate Name
Jimmy Womack

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 07

Transaction ID: 30311434

Date of Disbursement

05 / 19 / 2009

Amount of Each Disbursement this Period

1000.00

Jimmy Womack, STATE HOUSE
7th MI

B.

Full Name (Last, First, Middle Initial)

Committee to Elect Joel Sheltroun

Mailing Address 2225 Gray Rd.

City State Zip Code
West Branch MI 48661

Purpose of Disbursement
Joel Sheltroun, STATE HOUSE 103rd MI

Candidate Name
Joel Sheltroun

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 03

Transaction ID: 30311435

Date of Disbursement

05 / 13 / 2009

Amount of Each Disbursement this Period

500.00

Joel Sheltroun, STATE HOU-
SE 103rd MI

C.

Full Name (Last, First, Middle Initial)

Committee to Elect John Espinoza

Mailing Address 121 Wells St.

City State Zip Code
Crosswell MI 48422

Purpose of Disbursement
John Espinoza, STATE HOUSE 83rd MI

Candidate Name
MI Rep. John Espinoza

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 83

Transaction ID: 30311436

Date of Disbursement

05 / 12 / 2009

Amount of Each Disbursement this Period

500.00

John Espinoza, STATE HOUSE
83rd MI

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Kate Ebli for State Representative

Mailing Address P.O. Box 2141

City Monroe State MI Zip Code 48162

Purpose of Disbursement
Kate Ebli, STATE HOUSE 56th MI

Candidate Name
MI Rep. Kate Ebli

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 56

Transaction ID: 30311437

Date of Disbursement

02 / 25 / 2009

Amount of Each Disbursement this Period

750.00

Kate Ebli, STATE HOUSE 56-th MI

B. Full Name (Last, First, Middle Initial)
Committee to Elect Kathy Angerer

Mailing Address P.O. Box 157

City Dundee State MI Zip Code 48131

Purpose of Disbursement
Kathy Angerer, STATE HOUSE 55th MI

Candidate Name
MI Rep. Kathy Angerer

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 55

Transaction ID: 30311438

Date of Disbursement

06 / 10 / 2009

Amount of Each Disbursement this Period

1000.00

Kathy Angerer, STATE HOUSE 55th MI

C. Full Name (Last, First, Middle Initial)
Committee to Elect Marie Donigan

Mailing Address 612 Dorchester

City Royal Oak State MI Zip Code 48067

Purpose of Disbursement
Marie Donigan, STATE HOUSE 26th MI

Candidate Name
MI Rep. Marie Donigan

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 26

Transaction ID: 30311439

Date of Disbursement

03 / 24 / 2009

Amount of Each Disbursement this Period

800.00

Marie Donigan, STATE HOUSE 26th MI

SUBTOTAL of Disbursements This Page (optional)

2550.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Committee to Elect Mike Lahti

Mailing Address 400 Elevation St.

City
Hancock

State
MI

Zip Code
49330

Purpose of Disbursement

Mike Lahti, STATE HOUSE 110th MI

Candidate Name

Mike Lahti

011

Category/
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

State: MI

District: 10

Transaction ID: 30311440

Date of Disbursement

03 / 31 / 2009

Amount of Each Disbursement this Period

500.00

Mike Lahti, STATE HOUSE
110th MI

B.

Full Name (Last, First, Middle Initial)

Committee to Elect Richard LeBlanc

Mailing Address 36267 Canyon Dr.

City
Westland

State
MI

Zip Code
48186

Purpose of Disbursement

Richard LeBlanc, STATE HOUSE 18th MI

Candidate Name

Richard LeBlanc

011

Category/
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

State: MI

District: 18

Transaction ID: 30311441

Date of Disbursement

05 / 06 / 2009

Amount of Each Disbursement this Period

600.00

Richard LeBlanc, STATE HO-
USE 18th MI

C.

Full Name (Last, First, Middle Initial)

Committee to Elect Robert B. Jones

Mailing Address P.O. Box 2045

City
Kalamazoo

State
MI

Zip Code
49003

Purpose of Disbursement

Robert Jones, STATE HOUSE 60th MI

Candidate Name

Robert B Jones

011

Category/
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

State: MI

District: 60

Transaction ID: 30311442

Date of Disbursement

06 / 23 / 2009

Amount of Each Disbursement this Period

800.00

Robert Jones, STATE HOUSE
60th MI

SUBTOTAL of Disbursements This Page (optional)

1900.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Committee to Elect Shanelle Jackson

Mailing Address 19413 Burton Rd.

City State Zip Code
Detroit MI 48219

Purpose of Disbursement
Shanelle Jackson, STATE HOUSE 9th MI

Candidate Name
Shanelle Jackson

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 09

Transaction ID: 30311443

Date of Disbursement

02 / 26 / 2009

Amount of Each Disbursement this Period

800.00

Shanelle Jackson, STATE
HOUSE 9th MI

B. Full Name (Last, First, Middle Initial)
Committee to Elect Steve Lindberg

Mailing Address P.O. Box 109

City State Zip Code
Marquette MI 49855

Purpose of Disbursement
Steve Lindberg, STATE HOUSE 109th MI

Candidate Name
Steve Lindberg

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 09

Transaction ID: 30311444

Date of Disbursement

04 / 28 / 2009

Amount of Each Disbursement this Period

500.00

Steve Lindberg, STATE HOU-
SE 109th MI

C. Full Name (Last, First, Middle Initial)
Committee to Elect Terry Brown

Mailing Address P.O. Box 75

City State Zip Code
Pigeon MI 48755

Purpose of Disbursement
Terry Brown, STATE HOUSE 84th MI

Candidate Name
MI Rep. Terry Brown

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 84

Transaction ID: 30311445

Date of Disbursement

04 / 28 / 2009

Amount of Each Disbursement this Period

700.00

Terry Brown, STATE HOUSE
84th MI

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Committee to Elect Lamar Lemmons, Jr.	Transaction ID: 30311446 Date of Disbursement
Mailing Address 11024 Whittier	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 1 / 2 0 0 9</div> </div>
City Detroit State MI Zip Code 48213	Amount of Each Disbursement this Period
Purpose of Disbursement Lamar Lemmons, STATE HOUSE 2nd MI	<div>300.00</div>
Candidate Name Lamar Lemmons	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Lamar Lemmons, STATE HOUSE 2nd MI	
B. Full Name (Last, First, Middle Initial) Committee to Elect Lamar Lemmons, Jr.	Transaction ID: 30311448 Date of Disbursement
Mailing Address 11024 Whittier	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 3 / 2 0 0 9</div> </div>
City Detroit State MI Zip Code 48213	Amount of Each Disbursement this Period
Purpose of Disbursement Lamar Lemmons, STATE HOUSE 2nd MI	<div>600.00</div>
Candidate Name Lamar Lemmons	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Lamar Lemmons, STATE HOUSE 2nd MI	
C. Full Name (Last, First, Middle Initial) Corriveau Leadership Fund	Transaction ID: 30311449 Date of Disbursement
Mailing Address PO Box 5251	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 9 / 2 0 0 9</div> </div>
City Northville State MI Zip Code 48167	Amount of Each Disbursement this Period
Purpose of Disbursement Contributions to State PACs/Independent Committees	<div>1000.00</div>
Candidate Name	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Contributions to State PA-Cs/Independent Committees	

SUBTOTAL of Disbursements This Page (optional)

1900.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Coulouris Leadership Fund

Mailing Address PO Box 2005

City
Saginaw

State
MI

Zip Code
48605

Purpose of Disbursement

Contributions to State PACs/Independent Committees

Candidate Name

011

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 30311451

Date of Disbursement

06 / 08 / 2009

Amount of Each Disbursement this Period

2500.00

Contributions to State PA-
Cs/Independent Committees

B.

Full Name (Last, First, Middle Initial)

CTE Woodrow Stanley 34th District State Representative

Mailing Address 2211 Brownell Blvd

City
Flint

State
MI

Zip Code
48504

Purpose of Disbursement

Woodrow Stanley, STATE HOUSE 34th MI

Candidate Name

Woodrow Stanley

011

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI

District: 34

Transaction ID: 30311452

Date of Disbursement

04 / 29 / 2009

Amount of Each Disbursement this Period

600.00

Woodrow Stanley, STATE HO-
USE 34th MI

C.

Full Name (Last, First, Middle Initial)

Dillon Leadership Fund

Mailing Address P.O. Box 16106

City
Lansing

State
MI

Zip Code
48901

Purpose of Disbursement

Contributions to State PACs/Independent Committees

Candidate Name

011

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 30311455

Date of Disbursement

03 / 06 / 2009

Amount of Each Disbursement this Period

3000.00

Contributions to State PA-
Cs/Independent Committees

SUBTOTAL of Disbursements This Page (optional)

6100.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Dillon Leadership Fund

Mailing Address P.O. Box 16106

City
Lansing

State
MI

Zip Code
48901

Purpose of Disbursement

Contributions to State PACs/Independent Committees

Candidate Name

011

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 30311457

Date of Disbursement

06 / 08 / 2009

Amount of Each Disbursement this Period

5000.00

Contributions to State PA-
Cs/Independent Committees

B.

Full Name (Last, First, Middle Initial)

Douglas A. Geiss for State Representative

Mailing Address 25680 Greenlawn

City
Taylor

State
MI

Zip Code
48180

Purpose of Disbursement

Douglas Geiss, STATE HOUSE 22nd MI

Candidate Name

Douglas A Geiss

011

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI

District: 22

Transaction ID: 30311458

Date of Disbursement

03 / 24 / 2009

Amount of Each Disbursement this Period

500.00

Douglas Geiss, STATE HOUSE
22nd MI

C.

Full Name (Last, First, Middle Initial)

Team Durhal - Fred Durhal Jr for State Representative

Mailing Address 12533 Broadstreet

City
Detroit

State
MI

Zip Code
48204

Purpose of Disbursement

Fred Durhal, STATE HOUSE 6th MI

Candidate Name

Fred Durhal, Jr

011

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI

District: 06

Transaction ID: 30311460

Date of Disbursement

06 / 03 / 2009

Amount of Each Disbursement this Period

500.00

Fred Durhal, STATE HOUSE
6th MI

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Elect Vicki Barnett	Transaction ID: 30311462 Date of Disbursement																				
Mailing Address 29271 Glencastle Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	4		2	0	0	9												
City Farmington Hills State MI Zip Code 48336	Amount of Each Disbursement this Period																				
Purpose of Disbursement Vicki Barnett, STATE HOUSE MI	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name Vicki Barnett	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 00	Vicki Barnett, STATE HOUSE MI																				
B. Full Name (Last, First, Middle Initial) Friends of Andy Coulouris	Transaction ID: 30311470 Date of Disbursement																				
Mailing Address P.O. Box 2005	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	9												
City Saginaw State MI Zip Code 48605	Amount of Each Disbursement this Period																				
Purpose of Disbursement Andrew Coulouris, STATE HOUSE 95th MI	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Andrew Coulouris	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 95	Andrew Coulouris, STATE HOUSE 95th MI																				
C. Full Name (Last, First, Middle Initial) Friends of Andy Neumann	Transaction ID: 30311472 Date of Disbursement																				
Mailing Address 2205 US 23 South STE 108	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	8		2	0	0	9												
City Alpena State MI Zip Code 49707	Amount of Each Disbursement this Period																				
Purpose of Disbursement Andy Neumann, STATE HOUSE 106th MI	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Andy Neumann	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 06	Andy Neumann, STATE HOUSE 106th MI																				

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Friends of Deb Kennedy	Transaction ID: 30311476 Date of Disbursement																				
Mailing Address 19034 Seaton Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	6		2	0	0	9												
City Brownstown State MI Zip Code 48193	Amount of Each Disbursement this Period																				
Purpose of Disbursement Deb Kennedy, STATE HOUSE 23rd MI Candidate Name Deb Kennedy	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 23 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type Deb Kennedy, STATE HOUSE 23rd MI																				
B. Full Name (Last, First, Middle Initial) Friends of Doug Bennett	Transaction ID: 30311478 Date of Disbursement																				
Mailing Address 2339 Windy Ridge Dr.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	3		2	0	0	9												
City Muskegon State MI Zip Code 49442	Amount of Each Disbursement this Period																				
Purpose of Disbursement Doug Bennett, STATE HOUSE 92nd MI Candidate Name Doug Bennett	<table border="1"> <tr> <td colspan="10">600.00</td> </tr> </table>	600.00																			
600.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 92 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type Doug Bennett, STATE HOUSE 92nd MI																				
C. Full Name (Last, First, Middle Initial) Friends of Fred Miller	Transaction ID: 30311480 Date of Disbursement																				
Mailing Address P.O. Box 46274	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	9		2	0	0	9												
City Mt Clemens State MI Zip Code 48046	Amount of Each Disbursement this Period																				
Purpose of Disbursement Fred Miller, STATE HOUSE 31st MI Candidate Name Fred Miller	<table border="1"> <tr> <td colspan="10">300.00</td> </tr> </table>	300.00																			
300.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 31 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type Fred Miller, STATE HOUSE 31st MI																				

SUBTOTAL of Disbursements This Page (optional)

1400.00

TOTAL This Period (last page this line number only)

	21b		22		23		24		25		26
	27		28a		28b		28c	x	29		30b

Blue Cross Blue Shield of Michigan PAC

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Friends of John Switalski Mailing Address 31705 Forest Lane	Transaction ID: 30311490 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 4 / 2 0 0 9</div> </div>
City Warren State MI Zip Code 48093 Purpose of Disbursement Jonathon Switalski, STATE HOUSE 25th MI Candidate Name Jonathon M Switalski Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 25	Amount of Each Disbursement this Period <div>500.00</div> Jonathon Switalski, STATE HOUSE 25th MI
B. Full Name (Last, First, Middle Initial) Friends of Mary Valentine Mailing Address P.O. Box 421 City Muskegon State MI Zip Code 49441 Purpose of Disbursement Mary Valentine, STATE HOUSE 91st MI Candidate Name MI Rep. Mary Valentine Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 91	Transaction ID: 30311492 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 3 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>600.00</div> Mary Valentine, STATE HOUSE 91st MI
C. Full Name (Last, First, Middle Initial) Friends of Rashida Tlaib Mailing Address PO Box 9380 City Detroit State MI Zip Code 48209 Purpose of Disbursement Rashida Tlaib, STATE HOUSE 12th MI Candidate Name Rashida Tlaib Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 12	Transaction ID: 30311496 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 5 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>500.00</div> Rashida Tlaib, STATE HOUSE 12th MI

SUBTOTAL of Disbursements This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Friends of Richard Hammel

Mailing Address 6343 W. Clovis

City
Flushing

State
MI

Zip Code
48433

Purpose of Disbursement
Richard Hammel, STATE HOUSE 48th MI

Candidate Name
Richard Hammel

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 48

Transaction ID: 30311498

Date of Disbursement

02 / 25 / 2009

Amount of Each Disbursement this Period

800.00

Richard Hammel, STATE HOUSE 48th MI

B.

Full Name (Last, First, Middle Initial)

Friends of Robert Dean

Mailing Address P.O. Box 6861

City
Grand Rapids

State
MI

Zip Code
49516

Purpose of Disbursement
Robert Dean, STATE HOUSE 75th MI

Candidate Name
MI Rep. Robert Dean

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 75

Transaction ID: 30311500

Date of Disbursement

02 / 17 / 2009

Amount of Each Disbursement this Period

800.00

Robert Dean, STATE HOUSE 75th MI

C.

Full Name (Last, First, Middle Initial)

Friends of Roy Schmidt

Mailing Address 1127 Vaness NW

City
Grand Rapids

State
MI

Zip Code
49504

Purpose of Disbursement
Roy Schmidt, STATE HOUSE 76th MI

Candidate Name
Roy Schmidt

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 76

Transaction ID: 30311502

Date of Disbursement

04 / 22 / 2009

Amount of Each Disbursement this Period

600.00

Roy Schmidt, STATE HOUSE 76th MI

SUBTOTAL of Disbursements This Page (optional)

2200.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Friends of Roy Schmidt	Transaction ID: 30311505 Date of Disbursement																				
Mailing Address 1127 Vaness NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	8		2	0	0	9												
City Grand Rapids State MI Zip Code 49504	Amount of Each Disbursement this Period																				
Purpose of Disbursement Roy Schmidt, STATE HOUSE 76th MI	<table border="1"> <tr> <td>150.00</td> </tr> </table>	150.00																			
150.00																					
Candidate Name Roy Schmidt	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 76	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Roy Schmidt, STATE HOUSE 76th MI																				
B. Full Name (Last, First, Middle Initial) Friends for Vincent Gregory	Transaction ID: 30311509 Date of Disbursement																				
Mailing Address 29501 Red Leaf Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	4		2	0	0	9												
City Southfield State MI Zip Code 48076	Amount of Each Disbursement this Period																				
Purpose of Disbursement Vincent Gregory, STATE HOUSE 35th MI	<table border="1"> <tr> <td>300.00</td> </tr> </table>	300.00																			
300.00																					
Candidate Name Vincent Gregory	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 35	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Vincent Gregory, STATE HO- USE 35th MI																				
C. Full Name (Last, First, Middle Initial) Friends to elect Bert Johnson	Transaction ID: 30311511 Date of Disbursement																				
Mailing Address 36 Eason St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	0		2	0	0	9												
City Highland Pk. State MI Zip Code 48203	Amount of Each Disbursement this Period																				
Purpose of Disbursement Bert Johnson, STATE HOUSE 5th MI	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Bert Johnson	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 05	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Bert Johnson, STATE HOUSE 5th MI																				

SUBTOTAL of Disbursements This Page (optional)

1450.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

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(check only one)

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Joan Bauer for State Representative

Mailing Address 3105 S. Martin Luther King

City
Lansing

State
MI

Zip Code
48910

Purpose of Disbursement

Joan Bauer, STATE HOUSE 68th MI

Candidate Name
Joan Bauer

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 68

Transaction ID: 30311514

Date of Disbursement

06 / 22 / 2009

Amount of Each Disbursement this Period

500.00

Joan Bauer, STATE HOUSE
68th MI

B.

Full Name (Last, First, Middle Initial)

Lee Gonzales Team

Mailing Address 2460 Murphy

City
Flint

State
MI

Zip Code
48504

Purpose of Disbursement

Lee Gonzales, STATE HOUSE 49th MI

Candidate Name
Lee Gonzales

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 49

Transaction ID: 30311528

Date of Disbursement

06 / 24 / 2009

Amount of Each Disbursement this Period

600.00

Lee Gonzales, STATE HOUSE
49th MI

C.

Full Name (Last, First, Middle Initial)

Marc Corriveau for State Representative

Mailing Address P.O. Box 5251

City
Northville

State
MI

Zip Code
48167

Purpose of Disbursement

Marc Corriveau, STATE HOUSE 20th MI

Candidate Name
MI Rep. Marc Corriveau

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 20

Transaction ID: 30311531

Date of Disbursement

02 / 18 / 2009

Amount of Each Disbursement this Period

1000.00

Marc Corriveau, STATE HOU-
SE 20th MI

SUBTOTAL of Disbursements This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Mark Meadows for State Representative

Mailing Address P.O. Box 4041

City East Lansing State MI Zip Code 48826

Purpose of Disbursement
Mark Meadows, STATE HOUSE 69th MI

Candidate Name
Mark Meadows

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 69

Transaction ID: 30311533

Date of Disbursement

01 / 27 / 2009

Amount of Each Disbursement this Period

1000.00

Mark Meadows, STATE HOUSE
69th MI

B. Full Name (Last, First, Middle Initial)
Mark Meadows for State Representative

Mailing Address P.O. Box 4041

City East Lansing State MI Zip Code 48826

Purpose of Disbursement
Mark Meadows, STATE HOUSE 69th MI

Candidate Name
Mark Meadows

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 69

Transaction ID: 30311537

Date of Disbursement

02 / 24 / 2009

Amount of Each Disbursement this Period

500.00

Mark Meadows, STATE HOUSE
69th MI

C. Full Name (Last, First, Middle Initial)
Martin Griffin for State Representative

Mailing Address 705 S. Grinnell

City Jackson State MI Zip Code 49203

Purpose of Disbursement
Martin Griffin, STATE HOUSE 64th MI

Candidate Name
MI Rep. Martin Griffin

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 64

Transaction ID: 30311538

Date of Disbursement

03 / 18 / 2009

Amount of Each Disbursement this Period

400.00

Martin Griffin, STATE HOU-
SE 64th MI

SUBTOTAL of Disbursements This Page (optional)

1900.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Meadows Majority Fund	Transaction ID: 30311539 Date of Disbursement																				
Mailing Address P.O. Box 4041	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		3	0		2	0	0	9												
City East Lansing State MI Zip Code 48826	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contributions to State PACs/Independent Committees	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Contributions to State PA- Cs/Independent Committees																				
B. Full Name (Last, First, Middle Initial) Michigan House Democratic Fund	Transaction ID: 30311544 Date of Disbursement																				
Mailing Address P.O. Box 16193	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	2		2	0	0	9												
City Lansing State MI Zip Code 48909	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contributions to State PACs/Independent Committees	<table border="1"> <tr> <td colspan="10">20000.00</td> </tr> </table>	20000.00																			
20000.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Contributions to State PA- Cs/Independent Committees																				
C. Full Name (Last, First, Middle Initial) Pam Byrnes for State Representative	Transaction ID: 30311546 Date of Disbursement																				
Mailing Address 17381 N. M-52	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	7		2	0	0	9												
City Chelsea State MI Zip Code 48118	Amount of Each Disbursement this Period																				
Purpose of Disbursement Pamela Byrnes, STATE HOUSE 52nd MI	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name MI Rep. Pamela Byrnes	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 52	Pamela Byrnes, STATE HOUSE 52nd MI																				

SUBTOTAL of Disbursements This Page (optional)

22000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Rebekah Warren for State Representative

Mailing Address 234 Eighth St.

City State Zip Code
Ann Arbor MI 48103

Purpose of Disbursement
Rebekah Warren, STATE HOUSE 53rd MI

Candidate Name
Rebekah Warren

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
 Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 53

Transaction ID: 30311550

Date of Disbursement

02 / 19 / 2009

Amount of Each Disbursement this Period

1000.00

Rebekah Warren, STATE HOUSE 53rd MI

B. Full Name (Last, First, Middle Initial)
Rebekah Warren for State Representative

Mailing Address 234 Eighth St.

City State Zip Code
Ann Arbor MI 48103

Purpose of Disbursement
Rebekah Warren, STATE HOUSE 53rd MI

Candidate Name
Rebekah Warren

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
 Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 53

Transaction ID: 30311555

Date of Disbursement

06 / 17 / 2009

Amount of Each Disbursement this Period

500.00

Rebekah Warren, STATE HOUSE 53rd MI

C. Full Name (Last, First, Middle Initial)
Spade Leadership Fund

Mailing Address PO Box 157

City State Zip Code
Tipton MI 49287

Purpose of Disbursement
Contributions to State PACs/Independent Committees

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State: District:

Transaction ID: 30311558

Date of Disbursement

03 / 25 / 2009

Amount of Each Disbursement this Period

500.00

Contributions to State PACs/Independent Committees

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

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(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Supporters of Gary McDowell

Mailing Address 10820 Glen St.

City
Rudyard

State
MI

Zip Code
49780

Purpose of Disbursement
Gary McDowell, STATE HOUSE 107th MI

Candidate Name
MI Rep. Gary McDowell

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 07

Transaction ID: 30311562

Date of Disbursement

04 / 21 / 2009

Amount of Each Disbursement this Period

500.00

Gary McDowell, STATE HOUSE
107th MI

B.

Full Name (Last, First, Middle Initial)

House Republican Campaign Committee

Mailing Address P.O. Box 15035

City
Lansing

State
MI

Zip Code
48901

Purpose of Disbursement
Contributions to State PACs/Independent Committees

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 30311564

Date of Disbursement

02 / 03 / 2009

Amount of Each Disbursement this Period

12500.00

Contributions to State PA-
Cs/Independent Committees

C.

Full Name (Last, First, Middle Initial)

Bill Caul for State Representative

Mailing Address P.O. Box 384

City
Mt. Pleasant

State
MI

Zip Code
48804

Purpose of Disbursement
Bill Caul, STATE HOUSE 99th MI

Candidate Name
Bill Caul

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 99

Transaction ID: 30311570

Date of Disbursement

04 / 21 / 2009

Amount of Each Disbursement this Period

300.00

Bill Caul, STATE HOUSE 99-
th MI

SUBTOTAL of Disbursements This Page (optional)

13300.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Bob Genetski for State Representative

Mailing Address 787 Pine Ave

City Holland State MI Zip Code 49423

Purpose of Disbursement
Robert Genetski, STATE HOUSE 88th MI

Candidate Name
Robert J Genetski

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President
Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 88

Transaction ID: 30313600

Date of Disbursement

05 / 07 / 2009

Amount of Each Disbursement this Period

250.00

Robert Genetski, STATE HO-
USE 88th MI

B. Full Name (Last, First, Middle Initial)
Cindy Denby for State Rep Comm

Mailing Address 9787 Amanda Drive

City Fowlerville State MI Zip Code 48836

Purpose of Disbursement
Cindy Denby, State House 47th MI

Candidate Name
Cindy Denby

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President
Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 47

Transaction ID: 30313601

Date of Disbursement

03 / 11 / 2009

Amount of Each Disbursement this Period

500.00

Cindy Denby, State House
47th MI

C. Full Name (Last, First, Middle Initial)
Citizens for John Walsh

Mailing Address 35041 Pembroke

City Livonia State MI Zip Code 48152

Purpose of Disbursement
John Walsh, STATE HOUSE 19th MI

Candidate Name
John Walsh

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President
Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 19

Transaction ID: 30313602

Date of Disbursement

04 / 01 / 2009

Amount of Each Disbursement this Period

500.00

John Walsh, STATE HOUSE
19th MI

SUBTOTAL of Disbursements This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Committee to Elect Darwin Booher

Mailing Address P.O. Box 971

City State Zip Code
Ewart MI 49631

Purpose of Disbursement
Darwin Booher, STATE HOUSE 102nd MI

Candidate Name
Darwin Booher

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 02

Transaction ID: 30313603

Date of Disbursement

05 / 13 / 2009

Amount of Each Disbursement this Period

300.00

Darwin Booher, STATE HOUSE
102nd MI

B. Full Name (Last, First, Middle Initial)
Committee to Elect Dave Hildenbrand

Mailing Address 2700 Timpson Ave. SE

City State Zip Code
Lowell MI 49331

Purpose of Disbursement
Dave Hildenbrand, STATE HOUSE 86th MI

Candidate Name
Dave Hildenbrand

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 86

Transaction ID: 30313605

Date of Disbursement

02 / 11 / 2009

Amount of Each Disbursement this Period

500.00

Dave Hildenbrand, STATE
HOUSE 86th MI

C. Full Name (Last, First, Middle Initial)
Committee to Elect Dave Hildenbrand

Mailing Address 2700 Timpson Ave. SE

City State Zip Code
Lowell MI 49331

Purpose of Disbursement
Dave Hildenbrand, STATE HOUSE 86th MI

Candidate Name
Dave Hildenbrand

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District: 86

Transaction ID: 30313606

Date of Disbursement

05 / 11 / 2009

Amount of Each Disbursement this Period

600.00

Dave Hildenbrand, STATE
HOUSE 86th MI

SUBTOTAL of Disbursements This Page (optional)

1400.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Committee to Elect Goeff Hansen

Mailing Address P.O. Box 167

City Hart State MI Zip Code 49420

Purpose of Disbursement
Goef Hansen, STATE HOUSE 100th MI

Candidate Name
Goef Hansen

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: 30313607

Date of Disbursement

03 / 12 / 2009

Amount of Each Disbursement this Period

500.00

Goef Hansen, STATE HOUSE
100th MI

B. Full Name (Last, First, Middle Initial)
Committee to Elect Goeff Hansen

Mailing Address P.O. Box 167

City Hart State MI Zip Code 49420

Purpose of Disbursement
Goef Hansen, STATE HOUSE 100th MI

Candidate Name
Goef Hansen

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: 30313608

Date of Disbursement

06 / 26 / 2009

Amount of Each Disbursement this Period

550.00

Goef Hansen, STATE HOUSE
100th MI

C. Full Name (Last, First, Middle Initial)
Committee to Elect Peter Lund State Rep

Mailing Address 6881 Muirfield

City Shelby Twp State MI Zip Code 48316

Purpose of Disbursement
Peter Lund, STATE HOUSE 36th MI

Candidate Name
Peter Lund

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 36

Transaction ID: 30313609

Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

500.00

Peter Lund, STATE HOUSE
36th MI

SUBTOTAL of Disbursements This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Committee to Elect Phillip Pavlov

Mailing Address P.O. Box 160

City Marysville State MI Zip Code 48040

Purpose of Disbursement
Phillip Pavlov, STATE HOUSE 81st MI

Candidate Name
Phillip Pavlov

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 81

Transaction ID: 30313610

Date of Disbursement

05 / 06 / 2009

Amount of Each Disbursement this Period

1000.00

Phillip Pavlov, STATE HOUSE 81st MI

B. Full Name (Last, First, Middle Initial)
Committee to Elect Tim Moore

Mailing Address P.O. Box 865

City Farwell State MI Zip Code 48622

Purpose of Disbursement
Tim Moore, STATE HOUSE 97th MI

Candidate Name
MI Rep. Tim Moore

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 97

Transaction ID: 30313611

Date of Disbursement

04 / 01 / 2009

Amount of Each Disbursement this Period

500.00

Tim Moore, STATE HOUSE 97th MI

C. Full Name (Last, First, Middle Initial)
Committee to Elect Tory Rocca

Mailing Address 37139 Camelot Dr. #271

City Sterling Heights State MI Zip Code 48312

Purpose of Disbursement
Tory Rocca, STATE HOUSE 30th MI

Candidate Name
Tory Rocca

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 30

Transaction ID: 30313612

Date of Disbursement

05 / 05 / 2009

Amount of Each Disbursement this Period

500.00

Tory Rocca, STATE HOUSE 30th MI

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Forward Michigan

Mailing Address 1616 S. Lansing

City State Zip Code
St. Johns MI 48879

Purpose of Disbursement
Contributions to State PACs/Independent Committees

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 30313613

Date of Disbursement

06 / 19 / 2009

Amount of Each Disbursement this Period

1050.00

Contributions to State PA-
Cs/Independent Committees

B.

Full Name (Last, First, Middle Initial)

Friends of Eileen Kowall

Mailing Address 2333 Cumberland Road

City State Zip Code
White Lake MI

Purpose of Disbursement
Eileen Kowall, STATE HOUSE 44th MI

Candidate Name
Eileen Kowall

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: MI District: 44

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 30313615

Date of Disbursement

02 / 04 / 2009

Amount of Each Disbursement this Period

300.00

Eileen Kowall, STATE HOUSE
44th MI

C.

Full Name (Last, First, Middle Initial)

Friends of Hugh D Crawford

Mailing Address 46275 Eleven Mile Road

City State Zip Code
Novi MI 48374

Purpose of Disbursement
Hugh Crawford, STATE HOUSE 38th MI

Candidate Name
Hugh D Crawford

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: MI District: 38

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 30313616

Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

450.00

Hugh Crawford, STATE HOUSE
38th MI

SUBTOTAL of Disbursements This Page (optional)

1800.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Friends of Jim Stamas	Transaction ID: 30313617 Date of Disbursement																				
Mailing Address 5915 Eastman Ave Ste 100	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	8		2	0	0	9												
City Midland State MI Zip Code 48640	Amount of Each Disbursement this Period																				
Purpose of Disbursement James Stamas, STATE HOUSE 98th MI Candidate Name James Nickolas Stamas	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 98 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type James Stamas, STATE HOUSE 98th MI																				
B. Full Name (Last, First, Middle Initial) Friends of Kevin Elsenheimer	Transaction ID: 30313618 Date of Disbursement																				
Mailing Address P.O. Box 114	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	3		2	0	0	9												
City Bellaire State MI Zip Code 49615	Amount of Each Disbursement this Period																				
Purpose of Disbursement Kevin Elsenheimer, STATE HOUSE 105th MI Candidate Name Kevin Elsenheimer	<table border="1"> <tr> <td colspan="10">600.00</td> </tr> </table>	600.00																			
600.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 05 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type Kevin Elsenheimer, STATE HOUSE 105th MI																				
C. Full Name (Last, First, Middle Initial) Friends of Wayne Schmidt	Transaction ID: 30313619 Date of Disbursement																				
Mailing Address PO Box 25	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	0	9												
City Traverse City State MI Zip Code 49685	Amount of Each Disbursement this Period																				
Purpose of Disbursement Wayne Schmidt, STATE HOUSE 104th MI Candidate Name Wayne Schmidt	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type Wayne Schmidt, STATE HOUSE 104th MI																				

SUBTOTAL of Disbursements This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Friends to Elect Sharon Tyler	Transaction ID: 30313620 Date of Disbursement																				
Mailing Address 886 Plym Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	0		2	0	0	9												
City Niles State MI Zip Code 49120	Amount of Each Disbursement this Period																				
Purpose of Disbursement Sharon Tyler, STATE HOUSE 78th MI Candidate Name Sharon Tyler	<table border="1"> <tr> <td colspan="10">300.00</td> </tr> </table>	300.00																			
300.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 78 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Sharon Tyler, STATE HOUSE 78th MI																				
B. Full Name (Last, First, Middle Initial) Committee to Elect Gail Haines	Transaction ID: 30313621 Date of Disbursement																				
Mailing Address PO Box 301085	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	5		2	0	0	9												
City Waterford State MI Zip Code 48330	Amount of Each Disbursement this Period																				
Purpose of Disbursement Gail Haines, STATE HOUSE 43rd MI Candidate Name Gail Haines	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 43 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Gail Haines, STATE HOUSE 43rd MI																				
C. Full Name (Last, First, Middle Initial) Green Team Majority Fund	Transaction ID: 30313622 Date of Disbursement																				
Mailing Address 4754 Karel Jean Ct. S.W.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	5		2	0	0	9												
City Wyoming State MI Zip Code 49519	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contributions to State PACs/Independent Committees Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contributions to State PACs/Independent Committees																				

SUBTOTAL of Disbursements This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Jim Marleau for State Representative	Transaction ID: 30313626 Date of Disbursement																				
Mailing Address 1437 Nakomis	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	9												
City Lake Orion State MI Zip Code 48362	Amount of Each Disbursement this Period																				
Purpose of Disbursement Jim Marleau, STATE HOUSE 46th MI	<table border="1"> <tr> <td>750.00</td> </tr> </table>	750.00																			
750.00																					
Candidate Name Jim Marleau	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 46	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Jim Marleau, STATE HOUSE 46th MI																				
B. Full Name (Last, First, Middle Initial) Jim Marleau for State Representative	Transaction ID: 30313629 Date of Disbursement																				
Mailing Address 1437 Nakomis	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	4		2	0	0	9												
City Lake Orion State MI Zip Code 48362	Amount of Each Disbursement this Period																				
Purpose of Disbursement Jim Marleau, STATE HOUSE 46th MI	<table border="1"> <tr> <td>300.00</td> </tr> </table>	300.00																			
300.00																					
Candidate Name Jim Marleau	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 46	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Jim Marleau, STATE HOUSE 46th MI																				
C. Full Name (Last, First, Middle Initial) Team to Elect Richard Ball	Transaction ID: 30313630 Date of Disbursement																				
Mailing Address 5370 Garrison Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	5		2	0	0	9												
City Laingsburg State MI Zip Code 48848	Amount of Each Disbursement this Period																				
Purpose of Disbursement Richard Ball, STATE HOUSE 85th MI	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name MI Rep. Richard Ball	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 85	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Richard Ball, STATE HOUSE 85th MI																				

SUBTOTAL of Disbursements This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Committee to Elect Jase Bolger

Mailing Address PO Box 638

City Marshall State MI Zip Code 49068

Purpose of Disbursement
James Bolger, STATE HOUSE 63rd MI

Candidate Name
James Bolger

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President
Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 63

Transaction ID: 30313631

Date of Disbursement

03 / 18 / 2009

Amount of Each Disbursement this Period

300.00

James Bolger, STATE HOUSE
63rd MI

B. Full Name (Last, First, Middle Initial)
JDC Genesee Fund

Mailing Address 12405 Jennings Rd.

City Linden State MI Zip Code 48451

Purpose of Disbursement
Contributions to State PACs/Independent Committees

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 30313632

Date of Disbursement

06 / 19 / 2009

Amount of Each Disbursement this Period

1000.00

Contributions to State PA-
Cs/Independent Committees

C. Full Name (Last, First, Middle Initial)
JDC Genesee Fund

Mailing Address 12405 Jennings Rd.

City Linden State MI Zip Code 48451

Purpose of Disbursement
Contributions to State PACs/Independent Committees

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 30313633

Date of Disbursement

06 / 30 / 2009

Amount of Each Disbursement this Period

4000.00

Contributions to State PA-
Cs/Independent Committees

SUBTOTAL of Disbursements This Page (optional)

5300.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

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(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Friends of Michael G. Sak State

Mailing Address 236 Valley Ave., NW

City State Zip Code
Grand Rapids MI 49504

Purpose of Disbursement
Michael Sak, STATE HOUSE 76th MI

Candidate Name
Michael G Sak

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 76

Transaction ID: 30313634

Date of Disbursement

06 / 16 / 2009

Amount of Each Disbursement this Period

250.00

Michael Sak, STATE HOUSE
76th MI

B.

Full Name (Last, First, Middle Initial)

Citizens for John J. Gleason

Mailing Address 2617 Macomber

City State Zip Code
Flint MI 48503

Purpose of Disbursement
John Gleason, STATE SENATE 27th MI

Candidate Name
John Gleason

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District:

Transaction ID: 30313635

Date of Disbursement

06 / 05 / 2009

Amount of Each Disbursement this Period

350.00

John Gleason, STATE SENATE
27th MI

C.

Full Name (Last, First, Middle Initial)

Citizens for John J. Gleason

Mailing Address 2617 Macomber

City State Zip Code
Flint MI 48503

Purpose of Disbursement
John Gleason, STATE SENATE 27th MI

Candidate Name
John Gleason

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District:

Transaction ID: 30313637

Date of Disbursement

03 / 17 / 2009

Amount of Each Disbursement this Period

350.00

John Gleason, STATE SENATE
27th MI

SUBTOTAL of Disbursements This Page (optional)

950.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial)
Committee to Elect Samuel Buzz Thomas - Senate

Mailing Address 19260 Burlington Dr.

City State Zip Code
Detroit MI 48203Purpose of Disbursement
Samuel Thomas, STATE SENATE 4th MICandidate Name
Samuel Buzz Thomas011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ President
Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District:

Transaction ID: 30313638

Date of Disbursement

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 0 9

Amount of Each Disbursement this Period

1000.00

Samuel Thomas, STATE SENA-
TE 4th MI**B.** Full Name (Last, First, Middle Initial)
Whitmer for Senate

Mailing Address P.O. Box 11063

City State Zip Code
Lansing MI 48912Purpose of Disbursement
Gretchen Whitmer, STATE SENATE 23rd MICandidate Name
MI Sen. Gretchen Whitmer011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ President
Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District:

Transaction ID: 30313639

Date of Disbursement

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 9

Amount of Each Disbursement this Period

1000.00

Gretchen Whitmer, STATE
SENATE 23rd MI**C.** Full Name (Last, First, Middle Initial)
Committee to Elect Irma Clark to Senate

Mailing Address 2688 Oakman Blvd.

City State Zip Code
Detroit MI 48238Purpose of Disbursement
Irma Clark, STATE SENATE 3rd MICandidate Name
Representa Irma Clark011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ President
Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District:

Transaction ID: 30313640

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 0 9

Amount of Each Disbursement this Period

1000.00

Irma Clark, STATE SENATE
3rd MI

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 206 / 223

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Committee to Elect Michael Switalski State Senator	Transaction ID: 30313642 Date of Disbursement																				
Mailing Address 31412 Gay	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	8		2	0	0	9												
City Roseville State MI Zip Code 48066	Amount of Each Disbursement this Period																				
Purpose of Disbursement Michael Switalski, STATE SENATE 10th MI Candidate Name Michael Switalski	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District:	011 Category/ Type Michael Switalski, STATE SENATE 10th MI																				
B. Full Name (Last, First, Middle Initial) Deb Cherry Committee	Transaction ID: 30313644 Date of Disbursement																				
Mailing Address 2124 S. Belsay Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	3		2	0	0	9												
City Burton State MI Zip Code 48519	Amount of Each Disbursement this Period																				
Purpose of Disbursement Deb Cherry, STATE SENATE 26th MI Candidate Name Deb Cherry	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District:	011 Category/ Type Deb Cherry, STATE SENATE 26th MI																				
C. Full Name (Last, First, Middle Initial) Dennis Olshove for State Senate	Transaction ID: 30313646 Date of Disbursement																				
Mailing Address 29723 Roan	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	8		2	0	0	9												
City Warren State MI Zip Code 49093	Amount of Each Disbursement this Period																				
Purpose of Disbursement Dennis Olshove, STATE SENATE 9th MI Candidate Name Dennis Olshove	<table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District:	011 Category/ Type Dennis Olshove, STATE SEN- ATE 9th MI																				

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Friends of Jim Barcia

Mailing Address 3190 Hidden Rd

City
Bay City

State
MI

Zip Code
48706

Purpose of Disbursement

James Barcia, STATE SENATE 31st MI

Candidate Name
James Barcia

011

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District:

Transaction ID: 30313648

Date of Disbursement

06 / 24 / 2009

Amount of Each Disbursement this Period

1000.00

James Barcia, STATE SENATE
31st MI

B.

Full Name (Last, First, Middle Initial)

Friends of Mike Prusi

Mailing Address 27 N. Basin Dr.

City
Negaunee

State
MI

Zip Code
49866

Purpose of Disbursement

Michael Prusi, STATE SENATE 38th MI

Candidate Name
Michael Prusi

011

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District:

Transaction ID: 30313649

Date of Disbursement

05 / 13 / 2009

Amount of Each Disbursement this Period

1000.00

Michael Prusi, STATE SENA-
TE 38th MI

C.

Full Name (Last, First, Middle Initial)

Friends to Elect Martha Scott

Mailing Address 75 Rhode Island

City
Highland Park

State
MI

Zip Code
48203

Purpose of Disbursement

Martha Scott, STATE SENATE 2nd MI

Candidate Name
MI Sen. Martha Scott

011

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District:

Transaction ID: 30313651

Date of Disbursement

04 / 22 / 2009

Amount of Each Disbursement this Period

1000.00

Martha Scott, STATE SENATE
2nd MI

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 208 / 223

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Gilda Jacobs for Senate	Transaction ID: 30313655 Date of Disbursement																				
Mailing Address 8353 Hendrie Blvd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	0	9												
City Huntington Woods State MI Zip Code 48070	Amount of Each Disbursement this Period																				
Purpose of Disbursement Gilda Jacobs, STATE SENATE 14th MI	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Gilda Jacobs	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District:	Gilda Jacobs, STATE SENATE 14th MI																				
B. Full Name (Last, First, Middle Initial) Citizens for Glenn S. Anderson	Transaction ID: 30313659 Date of Disbursement																				
Mailing Address 34300 Park Grove Dr.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	0	9												
City Westland State MI Zip Code 48185	Amount of Each Disbursement this Period																				
Purpose of Disbursement Glenn Anderson, STATE HOUSE 18th MI	<table border="1"> <tr> <td colspan="10">400.00</td> </tr> </table>	400.00																			
400.00																					
Candidate Name Representa Glenn Anderson	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 18	Glenn Anderson, STATE HOU- SE 18th MI																				
C. Full Name (Last, First, Middle Initial) Hansen Clarke for Senate	Transaction ID: 30313660 Date of Disbursement																				
Mailing Address 243 Congress Suite350	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		3	0		2	0	0	9												
City Detroit State MI Zip Code 48226	Amount of Each Disbursement this Period																				
Purpose of Disbursement Hansen Clarke, STATE HOUSE 7th MI	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Representa Hansen Clarke	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 07	Hansen Clarke, STATE HOUSE 7th MI																				

SUBTOTAL of Disbursements This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Ray Basham for Senate

Mailing Address 12406 Telegraph Rd.

City State Zip Code
Taylor MI 48180

Purpose of Disbursement
Raymond Basham, STATE SENATE 8th MI

Candidate Name
Raymond Basham

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District:

Transaction ID: 30313661

Date of Disbursement

04 / 28 / 2009

Amount of Each Disbursement this Period

1000.00

Raymond Basham, STATE SEN-
ATE 8th MI

B.

Full Name (Last, First, Middle Initial)

Senate Democratic Fund

Mailing Address P.O. box 111

City State Zip Code
Lansing MI 48909

Purpose of Disbursement
Contributions to State PACs/Independent Committees

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State: District:

Transaction ID: 30313662

Date of Disbursement

02 / 02 / 2009

Amount of Each Disbursement this Period

15000.00

Contributions to State PA-
Cs/Independent Committees

C.

Full Name (Last, First, Middle Initial)

Tupac Hunter for State Senate

Mailing Address 24461 Pembroke Ave.

City State Zip Code
Detroit MI 48219

Purpose of Disbursement
Tupac Hunter, STATE SENATE 5th MI

Candidate Name
Tupac Hunter

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District:

Transaction ID: 30313663

Date of Disbursement

02 / 04 / 2009

Amount of Each Disbursement this Period

1000.00

Tupac Hunter, STATE SENATE
5th MI

SUBTOTAL of Disbursements This Page (optional)

17000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 210 / 223

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Sanborn for Senate

Mailing Address 48945 VanDyke
Suite 10A

City State Zip Code
Shelby Twp. MI 48917

Purpose of Disbursement
Alan Sanborn, STATE SENATE 12th MI

Candidate Name
MI Sen. Alan Sanborn

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District:

Transaction ID: 30313665

Date of Disbursement

03 / 25 / 2009

Amount of Each Disbursement this Period

1000.00

Alan Sanborn, STATE SENATE
12th MI

B.

Full Name (Last, First, Middle Initial)

McManus for Senate

Mailing Address 7883 E. Alpers

City State Zip Code
Lake Lelanau MI 49653

Purpose of Disbursement
Michelle McManus, STATE SENATE 35th MI

Candidate Name
Michelle McManus

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District:

Transaction ID: 30313666

Date of Disbursement

02 / 18 / 2009

Amount of Each Disbursement this Period

1000.00

Michelle McManus, STATE
SENATE 35th MI

C.

Full Name (Last, First, Middle Initial)

McManus for Senate

Mailing Address 7883 E. Alpers

City State Zip Code
Lake Lelanau MI 49653

Purpose of Disbursement
Michelle McManus, STATE SENATE 35th MI

Candidate Name
Michelle McManus

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼

State: MI District:

Transaction ID: 30313670

Date of Disbursement

06 / 12 / 2009

Amount of Each Disbursement this Period

1000.00

Michelle McManus, STATE
SENATE 35th MI

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Friends of Jason Allen	Transaction ID: 30313671 Date of Disbursement																				
Mailing Address 415 Munson	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	9		2	0	0	9												
City Traverse City State MI Zip Code 49686	Amount of Each Disbursement this Period																				
Purpose of Disbursement Jason Allen, STATE SENATE 36th MI Candidate Name Representa Jason Allen	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Jason Allen, STATE SENATE 36th MI																					
B. Full Name (Last, First, Middle Initial) Friends of Jason Allen	Transaction ID: 30313675 Date of Disbursement																				
Mailing Address 415 Munson	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		3	0		2	0	0	9												
City Traverse City State MI Zip Code 49686	Amount of Each Disbursement this Period																				
Purpose of Disbursement Jason Allen, STATE SENATE 36th MI Candidate Name Representa Jason Allen	<table border="1"> <tr> <td colspan="10">400.00</td> </tr> </table>	400.00																			
400.00																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Jason Allen, STATE SENATE 36th MI																					
C. Full Name (Last, First, Middle Initial) Friends of Roger Kahn	Transaction ID: 30313676 Date of Disbursement																				
Mailing Address P.O. Box 1627	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	0		2	0	0	9												
City Saginaw State MI Zip Code 49605	Amount of Each Disbursement this Period																				
Purpose of Disbursement Roger Kahn, STATE HOUSE 94th MI Candidate Name Roger Kahn	<table border="1"> <tr> <td colspan="10">300.00</td> </tr> </table>	300.00																			
300.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 94	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Roger Kahn, STATE HOUSE 94th MI																					

SUBTOTAL of Disbursements This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 212 / 223

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Kahn Leadership Fund

Mailing Address P.O. Box 1627

City
Saginaw

State
MI

Zip Code
48605

Purpose of Disbursement
Contributions to State PACs/Independent Committees

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 30313678

Date of Disbursement

06 / 23 / 2009

Amount of Each Disbursement this Period

750.00

Contributions to State PA-
Cs/Independent Committees

B.

Full Name (Last, First, Middle Initial)

Randy Richardville for Senate

Mailing Address P.O. Box 1631

City
Monroe

State
MI

Zip Code
48161

Purpose of Disbursement
Randy Richardville, STATE SENATE 17th MI

Candidate Name
Randy Richardville

011

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District:

Transaction ID: 30313679

Date of Disbursement

06 / 19 / 2009

Amount of Each Disbursement this Period

550.00

Randy Richardville, STATE
SENATE 17th MI

C.

Full Name (Last, First, Middle Initial)

Richardville Leadership Fund

Mailing Address P.O. Box 2261

City
Monroe

State
MI

Zip Code
48161

Purpose of Disbursement
Contributions to State PACs/Independent Committees

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 30313682

Date of Disbursement

03 / 17 / 2009

Amount of Each Disbursement this Period

1000.00

Contributions to State PA-
Cs/Independent Committees

SUBTOTAL of Disbursements This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Stamas for State Senate

Mailing Address P.O. Box 153

City
Midland

State
MI

Zip Code
48640

Purpose of Disbursement

Tony Stamas, STATE SENATE 36th MI

Candidate Name

Representa Tony Stamas

011

Category/
Type

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

State: MI

District:

Transaction ID: 30313683

Date of Disbursement

01

29

2009

Amount of Each Disbursement this Period

1000.00

Tony Stamas, STATE SENATE
36th MI

B.

Full Name (Last, First, Middle Initial)

Stamas for State Senate

Mailing Address P.O. Box 153

City
Midland

State
MI

Zip Code
48640

Purpose of Disbursement

Tony Stamas, STATE SENATE 36th MI

Candidate Name

Representa Tony Stamas

011

Category/
Type

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

State: MI

District:

Transaction ID: 30313684

Date of Disbursement

06

29

2009

Amount of Each Disbursement this Period

1050.00

Tony Stamas, STATE SENATE
36th MI

C.

Full Name (Last, First, Middle Initial)

Commanders Majority Fund

Mailing Address 42479 Redfern

City
Canton

State
MI

Zip Code
48187

Purpose of Disbursement

Contributions to State PACs/Independent Committees

Candidate Name

011

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Transaction ID: 30313685

Date of Disbursement

02

04

2009

Amount of Each Disbursement this Period

1000.00

Contributions to State PA-
Cs/Independent Committees

SUBTOTAL of Disbursements This Page (optional)

3050.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 214 / 223

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Commanders Majority Fund

Mailing Address 42479 Redfern

City
Canton

State
MI

Zip Code
48187

Purpose of Disbursement

Contributions to State PACs/Independent Committees

Candidate Name

011

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 30313686

Date of Disbursement

06 / 26 / 2009

Amount of Each Disbursement this Period

500.00

Contributions to State PA-
Cs/Independent Committees

B.

Full Name (Last, First, Middle Initial)

Detroit Regional Chamber PAC

Mailing Address P.O. Box 33840

City
Detroit

State
MI

Zip Code
48232

Purpose of Disbursement

Contributions to State PACs/Independent Committees

Candidate Name

011

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 30313687

Date of Disbursement

05 / 28 / 2009

Amount of Each Disbursement this Period

1400.00

Contributions to State PA-
Cs/Independent Committees

C.

Full Name (Last, First, Middle Initial)

Committee to Elect Dan Scripps

Mailing Address PO Box 885

City
Northport

State
MI

Zip Code
49670

Purpose of Disbursement

Daniel Scripps, STATE HOUSE 101st MI

Candidate Name

Daniel C Scripps

011

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI

District: 01

Transaction ID: 30314208

Date of Disbursement

03 / 03 / 2009

Amount of Each Disbursement this Period

500.00

Daniel Scripps, STATE HOU-
SE 101st MI

SUBTOTAL of Disbursements This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Committee to Elect Judy A Nerat for State Rep

Mailing Address N4834 R 1 Drive

City
Wallace

State
MI

Zip Code
49893

Purpose of Disbursement

Judy Nerat, STATE HOUSE 108th MI

Candidate Name

Judy Nerat

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 08

Transaction ID: 30314209

Date of Disbursement

03 / 31 / 2009

Amount of Each Disbursement this Period

500.00

Judy Nerat, STATE HOUSE
108th MI

B.

Full Name (Last, First, Middle Initial)

Friends of Ellen Cogen Lipton

Mailing Address PO Box 7026

City
Huntington Woods

State
MI

Zip Code
48070

Purpose of Disbursement

Ellen Lipton, STATE HOUSE 27th MI

Candidate Name

Ellen Cogen Lipton

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 27

Transaction ID: 30314210

Date of Disbursement

04 / 22 / 2009

Amount of Each Disbursement this Period

600.00

Ellen Lipton, STATE HOUSE
27th MI

C.

Full Name (Last, First, Middle Initial)

Friends of Kate Segal

Mailing Address 108 Pinehurst Lane

City
Battle Creek

State
MI

Zip Code
49015

Purpose of Disbursement

Kate Segal, STATE HOUSE 62nd MI

Candidate Name

Kate Segal

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 62

Transaction ID: 30314211

Date of Disbursement

03 / 19 / 2009

Amount of Each Disbursement this Period

1000.00

Kate Segal, STATE HOUSE
62nd MI

SUBTOTAL of Disbursements This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Friends of Lisa Brown Mailing Address PO Box 251532	Transaction ID: 30314212 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	9	
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	4		2	0	0	9													
City West Bloomfield State MI Zip Code 48325 Purpose of Disbursement Lisa Brown, STATE HOUSE 39th MI Candidate Name Lisa Brown Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 39	Amount of Each Disbursement this Period <table border="1"> <tr> <td>500.00</td> </tr> </table> Lisa Brown, STATE HOUSE 39th MI	500.00																				
500.00																						
B. Full Name (Last, First, Middle Initial) Friends to Elect Dian Slavens Mailing Address PO Box 87212 City Canton State MI Zip Code 48187 Purpose of Disbursement Dian Slavens, STATE HOUSE 21st MI Candidate Name Dian Slavens Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 21	Transaction ID: 30314213 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>500.00</td> </tr> </table> Dian Slavens, STATE HOUSE 21st MI	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	9	500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	6		2	0	0	9													
500.00																						
C. Full Name (Last, First, Middle Initial) Jennifer Haase for State Representative Mailing Address 34886 Maplewood Lane City Richmond State MI Zip Code 48062 Purpose of Disbursement Jennifer Haase, STATE HOUSE 32nd MI Candidate Name Jennifer Haase Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 32	Transaction ID: 30314214 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>500.00</td> </tr> </table> Jennifer Haase, STATE HOUSE 32nd MI	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	9	500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	4		2	0	0	9													
500.00																						

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Melton for Michigan	Transaction ID: 30314224 Date of Disbursement																				
Mailing Address 2285 Snell Brook	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	3		2	0	0	9												
City Auburn Hills State MI Zip Code 48236	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contributions to State PACs/Independent Committees	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Contributions to State PA-Cs/Independent Committees																					
B. Full Name (Last, First, Middle Initial) Mike Huckleberry for State Representative	Transaction ID: 30314296 Date of Disbursement																				
Mailing Address 1738 Vining Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	4		2	0	0	9												
City Greenfield State MI Zip Code 48838	Amount of Each Disbursement this Period																				
Purpose of Disbursement Mike Huckleberry, STATE HOUSE 70th MI	<table border="1"> <tr> <td>600.00</td> </tr> </table>	600.00																			
600.00																					
Candidate Name Mike Huckleberry	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 70	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Mike Huckleberry, STATE HOUSE 70th MI																					
C. Full Name (Last, First, Middle Initial) Pam Byrnes Leadership Circle	Transaction ID: 30314308 Date of Disbursement																				
Mailing Address 17381 North M-52	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	3		2	0	0	9												
City Chelsea State MI Zip Code 48118	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contributions to State PACs/Independent Committees	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Contributions to State PA-Cs/Independent Committees																					

SUBTOTAL of Disbursements This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

People for Bettie Cook Scott

Mailing Address 17160 GRAVIER APT 6A

City
DETROIT

State
MI

Zip Code
48224

Purpose of Disbursement

Bettie Scott, STATE HOUSE 3rd MI

Candidate Name

Bettie Cook Scott

Office Sought:

☒ House

☐ Senate

☐ President

State: MI

District: 03

Disbursement For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Transaction ID: 30314310

Date of Disbursement

04 / 29 / 2009

Amount of Each Disbursement this Period

500.00

Bettie Scott, STATE HOUSE
3rd MI

B.

Full Name (Last, First, Middle Initial)

ROY PAC

Mailing Address 1127 Vaness NW

City
Grand Rapids

State
MI

Zip Code
49504

Purpose of Disbursement

Contributions to State PACs/Independent Committees

Candidate Name

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

Transaction ID: 30314311

Date of Disbursement

06 / 08 / 2009

Amount of Each Disbursement this Period

300.00

Contributions to State PA-
Cs/Independent Committees

C.

Full Name (Last, First, Middle Initial)

Sarah Roberts for State Representative

Mailing Address PO Box 643

City
St Clair Shores

State
MI

Zip Code
48080

Purpose of Disbursement

Sarah Roberts, STATE HOUSE 24th MI

Candidate Name

Sarah B Roberts

Office Sought:

☒ House

☐ Senate

☐ President

State: MI

District: 24

Disbursement For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Transaction ID: 30314312

Date of Disbursement

03 / 25 / 2009

Amount of Each Disbursement this Period

500.00

Sarah Roberts, STATE HOUSE
24th MI

SUBTOTAL of Disbursements This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Jud Gilbert for State House

Mailing Address 1414 St Clair River Dr

City Algonac State MI Zip Code 48001

Purpose of Disbursement
Jud Gilbert, STATE HOUSE MICandidate Name
Jud S Gilbert011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: 30314314

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	8	/	2	0	0	9

Amount of Each Disbursement this Period

500.00

Jud Gilbert, STATE HOUSE
MI**B.**

Full Name (Last, First, Middle Initial)

Jud Gilbert for State House

Mailing Address 1414 St Clair River Dr

City Algonac State MI Zip Code 48001

Purpose of Disbursement
Jud Gilbert, STATE HOUSE MICandidate Name
Jud S Gilbert011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: 30314354

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	5	/	2	0	0	9

Amount of Each Disbursement this Period

500.00

Jud Gilbert, STATE HOUSE
MI**C.**

Full Name (Last, First, Middle Initial)

Haveman House Fund

Mailing Address PO Box 457

City Zeeland State MI Zip Code 49464

Purpose of Disbursement
Contributions to State PACs/Independent Committees

Candidate Name

011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 30314415

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	0	9

Amount of Each Disbursement this Period

300.00

Contributions to State PA-
Cs/Independent Committees

SUBTOTAL of Disbursements This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Rick Jones for State Senate

Mailing Address P O BOX 115

City
Grand Ledge

State
MI

Zip Code
48837

Purpose of Disbursement

Rick Jones, STATE SENATE 24th MI

Candidate Name
Rick Jones

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District:

Transaction ID: 30314418

Date of Disbursement

03 / 18 / 2009

Amount of Each Disbursement this Period

600.00

Rick Jones, STATE SENATE
24th MI

B.

Full Name (Last, First, Middle Initial)

Paul H Scott for State Representative

Mailing Address PO Box 193

City
Grand Blanc

State
MI

Zip Code
48480

Purpose of Disbursement

Paul Scott, STATE HOUSE 51st MI

Candidate Name
Paul H Scott

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 51

Transaction ID: 30314419

Date of Disbursement

03 / 24 / 2009

Amount of Each Disbursement this Period

450.00

Paul Scott, STATE HOUSE
51st MI

C.

Full Name (Last, First, Middle Initial)

Joe Hune for State Senate

Mailing Address 4849 Hogback Rd

City
Fowlerville

State
MI

Zip Code
48836

Purpose of Disbursement

Joe Hune, STATE SENATE 22nd MI

Candidate Name
Joe Hune

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District:

Transaction ID: 30314704

Date of Disbursement

06 / 23 / 2009

Amount of Each Disbursement this Period

5000.00

Joe Hune, STATE SENATE 22-
nd MI

SUBTOTAL of Disbursements This Page (optional)

6050.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

John Proos for State Senate

Mailing Address PO Box 271

City
St. Joseph

State
MI

Zip Code
49085

Purpose of Disbursement
John Proos, STATE SENATE 21st MI

Candidate Name
John M Proos

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District:

Transaction ID: 30314705

Date of Disbursement

02 / 24 / 2009

Amount of Each Disbursement this Period

600.00

John Proos, STATE SENATE
21st MI

B.

Full Name (Last, First, Middle Initial)

John Proos for State Senate

Mailing Address PO Box 271

City
St. Joseph

State
MI

Zip Code
49085

Purpose of Disbursement
John Proos, STATE SENATE 21st MI

Candidate Name
John M Proos

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District:

Transaction ID: 30314707

Date of Disbursement

06 / 18 / 2009

Amount of Each Disbursement this Period

400.00

John Proos, STATE SENATE
21st MI

C.

Full Name (Last, First, Middle Initial)

Committee to Retain Elias Lumpkins

Mailing Address 1742 South Hampton SE

City
Grand Rapids

State
MI

Zip Code
49508

Purpose of Disbursement
Elias Lumpkins, County Commissioner 3rd MI

Candidate Name
Elias Lumpkins

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 30314775

Date of Disbursement

04 / 29 / 2009

Amount of Each Disbursement this Period

1000.00

Elias Lumpkins, County Co-
mmissioner 3rd MI

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A. Full Name (Last, First, Middle Initial) Cockrel for Mayor	Transaction ID: 30314776 Date of Disbursement																				
Mailing Address P.O. Box 32708	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	3		2	0	0	9												
City Detroit State MI Zip Code 48232	Amount of Each Disbursement this Period																				
Purpose of Disbursement Kenneth Cockrel, Mayor MI Candidate Name Kenneth Cockrel	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General2009	011 Category/ Type Kenneth Cockrel, Mayor MI																				
B. Full Name (Last, First, Middle Initial) Cockrel for Mayor	Transaction ID: 30314844 Date of Disbursement																				
Mailing Address P.O. Box 32708	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	3		2	0	0	9												
City Detroit State MI Zip Code 48232	Amount of Each Disbursement this Period																				
Purpose of Disbursement Kenneth Cockrel, Mayor MI Candidate Name Kenneth Cockrel	<table border="1"> <tr> <td colspan="10">7500.00</td> </tr> </table>	7500.00																			
7500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General2009	011 Category/ Type Kenneth Cockrel, Mayor MI																				
C. Full Name (Last, First, Middle Initial) Dave Bing for Mayor	Transaction ID: 30314847 Date of Disbursement																				
Mailing Address P.O. Box 31-0058	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	3		2	0	0	9												
City Detroit State MI Zip Code 48231	Amount of Each Disbursement this Period																				
Purpose of Disbursement Dave Bing, Mayor MI Candidate Name Dave Bing	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General2009	011 Category/ Type Dave Bing, Mayor MI																				

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

A.

Full Name (Last, First, Middle Initial)

Friends of Jim Stamas

Mailing Address 5915 Eastman Ave
Ste 100

City Midland State MI Zip Code 48640

Purpose of Disbursement
James Stamas, STATE HOUSE 98th MICandidate Name
James Nickolas Stamas011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 98

Transaction ID: 30315010

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	0	9

Amount of Each Disbursement this Period

250.00

James Stamas, STATE HOUSE
98th MI**B.**

Full Name (Last, First, Middle Initial)

John Moolenaar for State Senate

Mailing Address 5915 Eastman Ave
Ste 100

City Midland State MI Zip Code 48640

Purpose of Disbursement
John Moolenaar, STATE SENATE 36th MICandidate Name
John R Moolenaar011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District:

Transaction ID: 30315011

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	0	9

Amount of Each Disbursement this Period

250.00

John Moolenaar, STATE SEN-
ATE 36th MI

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

215375.00