

FEC
FORM 3XREPORT 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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

ADDRESS (number and street)
▼

1310 G STREET, NW

Check if different
than previously
reported. (ACC)

WASHINGTON

DC

20005

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00194746

3. IS THIS
REPORT

X

NEW
(N)

OR

AMENDED
(A)4. TYPE OF REPORT
(Choose One)(b) Monthly
Report
Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

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

(a) Quarterly Reports:

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)April 15
Quarterly Report(Q1)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (M13)

July 15
Quarterly Report(Q2)

(c) 12-Day

Primary (12P)

General (12G)

Runoff (12R)

October 15
Quarterly Report(Q3)PRE Election
Report for the:

Convention (12C)

Special (12S)

X January 31
Quarterly Report(YE)

Election on

in the
State ofJuly 31 Mid-Year
Report(Non-election
Year Only) (MY)

(d) 30-Day

Post -Election
Report for the:

General (30G)

Runoff (30R)

Special (30S)

Termination Report
(TER)

Election on

in the
State of

5. Covering Period

1 1

2 6

2 0 0 2

through

1 2

3 1

2 0 0 2

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

KATHY DIDAWICK

Signature of Treasurer

Electronically Filed by KATHY DIDAWICK

Date

0 1

0 9

2 0 0 3

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
OnlyFEC FORM 3X
(Revised 1/2001)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Report Covering the Period: From: ^h1 ^m1 ^d26 ^y2002 To: ^h12 ^m31 ^y2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^y 2002		89170.04
(b) Cash on Hand at Beginning of Reporting Period	54881.52	
(c) Total Receipts (from Line 19)	32964.40	340297.16
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	87845.92	429467.20
7. Total Disbursements (from Line 30)	17000.00	358621.28
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	70845.92	70845.92
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 (Revised 1/2001)

Page 3

Write or Type Committee Name

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Report Covering the Period: From: ^K11 ^D26 ^V2002 To: ^K12 ^D31 ^V2002

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	10113.37	
(i) Itemized (use Schedule A)	5541.26	
(ii) Unitemized		
(III) TOTAL (add Lines 11(a)(i) and (ii) ►	15654.63	180257.74
(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 32, page 4) ►	15654.63	180257.74
12. Transfers From Affiliated/Other Party Committees	15583.00	150716.00
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 36, page 4)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	1700.00	8700.00
17. Other Federal Receipts (Dividends, Interest, etc.)	26.77	623.42
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ►	32964.40	340297.16
20. Total Federal Receipts (subtract Line 18 from Line 19) ►	32964.40	340297.16

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/2001)

Page 4

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	54.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ►	0.00	54.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17000.00	357005.46
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	0.00	0.00
(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))	0.00	0.00
29. Other Disbursements.....	0.00	1561.62
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)	17000.00	358621.28
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)	17000.00	358621.28
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3)	15654.63	180257.74
33. Total Contribution Refunds (from Line 28(d))	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	15654.63	180257.74
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ►	0.00	54.00
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)	0.00	54.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. CHRISTOPHER AASLAND

Mailing Address

13790 GUILD AVE.

City

APPLE VALLEY

State

MN

Zip Code

55124

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Transaction ID: B0007416000001L11A1

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER AASLAND

Mailing Address

13790 GUILD AVE.

City

APPLE VALLEY

State

MN

Zip Code

55124

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Transaction ID: B0007426000001L11A1

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER AASLAND

Mailing Address

13790 GUILD AVE.

City

APPLE VALLEY

State

MN

Zip Code

55124

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Transaction ID: B0007436000001L11A1

SUBTOTAL of Receipts This Page (optional) ▶

45.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. CHRISTOPHER AASLAND

Mailing Address

13790 GUILD AVE.

City

APPLE VALLEY

State

MN

Zip Code

55124

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Transaction ID: B000744S000001L11A1

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER AASLAND

Mailing Address

13790 GUILD AVE.

City

APPLE VALLEY

State

MN

Zip Code

55124

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Transaction ID: B000745S000001L11A1

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER AASLAND

Mailing Address

13790 GUILD AVE.

City

APPLE VALLEY

State

MN

Zip Code

55124

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Transaction ID: B000747S000001L11A1

SUBTOTAL of Receipts This Page (optional) ▶

45.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. CHRISTOPHER AASLAND

Mailing Address

13780 GUILD AVE.

City

APPLE VALLEY

State

MN

Zip Code

55124

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Transaction ID: B0007486000001L11A1

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER AASLAND

Mailing Address

13780 GUILD AVE.

City

APPLE VALLEY

State

MN

Zip Code

55124

Date of Receipt

12 / 23 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Transaction ID: B0007645000001L11A1

Full Name (Last, First, Middle Initial)

C. JAMES S. ADAMSON, JR.

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

30.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B0007515000001L11A1

SUBTOTAL of Receipts This Page (optional)

60.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JAMES S. ADAMSON JR.

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 3 1 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B0007736000001L11A1

Full Name (Last, First, Middle Initial)

B. IRVING A. ALBRECHT

Mailing Address

120 ROBAULD AVENUE

City

State

Zip Code

CHAPIN

SC

29036

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

7.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR SM&NMD

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Transaction ID: B0007675000001L11A1

Full Name (Last, First, Middle Initial)

C. IRVING A. ALBRECHT

Mailing Address

120 ROBAULD AVENUE

City

State

Zip Code

CHAPIN

SC

29036

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

7.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR SM&NMD

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Transaction ID: B0007665000001L11A1

SUBTOTAL of Receipts This Page (optional)

34.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. IRVING A. ALBRECHT

Mailing Address

120 ROBAULD AVENUE

City

CHAPIN

State

SC

Zip Code

29036

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

7.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR SM&NMD

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Transaction ID: B0007696000001L11A1

Full Name (Last, First, Middle Initial)

B. SHARON K. ALLEN

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

30.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B0007515000002L11A1

Full Name (Last, First, Middle Initial)

C. SHARON K. ALLEN

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

12 / 31 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B0007735000002L11A1

SUBTOTAL of Receipts This Page (optional)

57.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. KAY L. ANDREWS

Mailing Address

514 PRESTWICK DRIVE

City

FLORENCE

State

SC

Zip Code

29501

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

28.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT TRICARE

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

812.00

Transaction ID: B000767S000005L11A1

Full Name (Last, First, Middle Initial)

B. KAY L. ANDREWS

Mailing Address

514 PRESTWICK DRIVE

City

FLORENCE

State

SC

Zip Code

29501

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

28.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT TRICARE

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

812.00

Transaction ID: B000768S000005L11A1

Full Name (Last, First, Middle Initial)

C. KAY L. ANDREWS

Mailing Address

514 PRESTWICK DRIVE

City

FLORENCE

State

SC

Zip Code

29501

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

28.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT TRICARE

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

812.00

Transaction ID: B000769S000005L11A1

SUBTOTAL of Receipts This Page (optional)

84.00

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:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. STEVEN A. AUSTIN

Mailing Address

214 COLD BRANCH DRIVE

City

COLUMBIA

State

SC

Zip Code

29223

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

10.00

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

SR. DIRECTOR OPERATION SERVICES

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000767S000009L11A1

Full Name (Last, First, Middle Initial)

B. STEVEN A. AUSTIN

Mailing Address

214 COLD BRANCH DRIVE

City

COLUMBIA

State

SC

Zip Code

29223

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

10.00

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

SR. DIRECTOR OPERATION SERVICES

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000768S000009L11A1

Full Name (Last, First, Middle Initial)

C. STEVEN A. AUSTIN

Mailing Address

214 COLD BRANCH DRIVE

City

COLUMBIA

State

SC

Zip Code

29223

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

10.00

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

SR. DIRECTOR OPERATION SERVICES

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000769S000009L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. PETER J. BABIN

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

75.00

Name of Employer
BC/BS OF MONTANA

Occupation
PRESIDENT & CEO

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Transaction ID: B0007496000001L11A1

Full Name (Last, First, Middle Initial)

B. PETER J. BABIN

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 2 0 0 2

Amount of Each Receipt this Period

75.00

Name of Employer
BC/BS OF MONTANA

Occupation
PRESIDENT & CEO

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Transaction ID: B0007481000001L11A1

Full Name (Last, First, Middle Initial)

C. LESLIE BAKER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

25.00

Name of Employer
BC/BS OF WESTERN NEW YORK

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Transaction ID: B0007468000019L11A1

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. LESLIE BAKER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 23 / 2002

Amount of Each Receipt this Period

25.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Transaction ID: B000760S000019L11A1

Full Name (Last, First, Middle Initial)

B. LESLIE BAKER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

25.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Transaction ID: B000760S000019L11A1

Full Name (Last, First, Middle Initial)

C. MARK W. BANKS

Mailing Address

4634 EDGEBROOK PL.

City

State

Zip Code

EDIN

MN

55424

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 12 / 2002

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1620.00

Transaction ID: B000741S000002L11A1

SUBTOTAL of Receipts This Page (optional) ▶

90.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MARK W. BANKS

Mailing Address

4634 EDGEBROOK PL.

City

State

Zip Code

EDIN

MN

55424

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

40.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

1620.00

Transaction ID: B0007426000002L11A1

Full Name (Last, First, Middle Initial)

B. MARK W. BANKS

Mailing Address

4634 EDGEBROOK PL.

City

State

Zip Code

EDIN

MN

55424

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

40.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

1620.00

Transaction ID: B0007439000002L11A1

Full Name (Last, First, Middle Initial)

C. MARK W. BANKS

Mailing Address

4634 EDGEBROOK PL.

City

State

Zip Code

EDIN

MN

55424

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

40.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

1620.00

Transaction ID: B0007449000002L11A1

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MARK W. BANKS

Mailing Address

4634 EDGEBROOK PL.

City

State

Zip Code

EDIN

MN

55424

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

40.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

1620.00

Transaction ID: B0007456000002L11A1

Full Name (Last, First, Middle Initial)

B. MARK W. BANKS

Mailing Address

4634 EDGEBROOK PL.

City

State

Zip Code

EDIN

MN

55424

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

40.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

1620.00

Transaction ID: B0007475000002L11A1

Full Name (Last, First, Middle Initial)

C. MARK W. BANKS

Mailing Address

4634 EDGEBROOK PL.

City

State

Zip Code

EDIN

MN

55424

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

40.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

1620.00

Transaction ID: B0007465000002L11A1

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MARK W. BANKS

Mailing Address

4634 EDGEBROOK PL.

City

EDIN

State

MN

Zip Code

55424

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

1620.00

Transaction ID: B000764S000002L11A1

Full Name (Last, First, Middle Initial)

B. CINDY T. BARBEE

Mailing Address

706 KING AVE.

City

FLORENCE

State

SC

Zip Code

29501

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation
DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000767S000011L11A1

Full Name (Last, First, Middle Initial)

C. CINDY T. BARBEE

Mailing Address

706 KING AVE.

City

FLORENCE

State

SC

Zip Code

29501

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation
DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000768S000011L11A1

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. CINDY T. BARBEE

Mailing Address

708 KING AVE.

City

FLORENCE

State

SC

Zip Code

29501

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B000769S000011L11A1

Full Name (Last, First, Middle Initial)

B. JAMES BARONE

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 23 / 2002

Amount of Each Receipt this Period

30.00

Name of Employer

BC/BS OF ILLINOIS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000757S000007L11A1

Full Name (Last, First, Middle Initial)

C. ANDREA BERGMAN

Mailing Address

3900 SOUTH 6TH STREET

City

ARLINGTON

State

VA

Zip Code

22204

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 06 / 2002

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS ASSOCIATION

Occupation

EXECUTIVE REP.

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000753S000002L11A1

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ANDREA BERGMAN

Mailing Address

3800 SOUTH 8TH STREET

City

ARLINGTON

State

VA

Zip Code

22204

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS ASSOCIATION

Occupation
EXECUTIVE REP.

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0007626000002L11A1

Full Name (Last, First, Middle Initial)

B. ROBERT BODEN

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20001

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer
BC/BS OF WESTERN NEW YORK

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Transaction ID: B00074680000020L11A1

Full Name (Last, First, Middle Initial)

C. ROBERT BODEN

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20001

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer
BC/BS OF WESTERN NEW YORK

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Transaction ID: B00076080000020L11A1

SUBTOTAL of Receipts This Page (optional)

40.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ROBERT BODEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Transaction ID: B000766S000020L11A1

Full Name (Last, First, Middle Initial)

B. DAVID BOUCHER

Mailing Address

417 WOTAN ROAD

City

State

Zip Code

COLUMBIA

SC

29223

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000767S000022L11A1

Full Name (Last, First, Middle Initial)

C. DAVID BOUCHER

Mailing Address

417 WOTAN ROAD

City

State

Zip Code

COLUMBIA

SC

29223

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000768S000022L11A1

SUBTOTAL of Receipts This Page (optional)

35.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DAVID BOUCHER

Mailing Address

417 WOTAN ROAD

City

COLUMBIA

State

SC

Zip Code

29223

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B0007696000022L11A1

Full Name (Last, First, Middle Initial)

B. JERRY W. BRADSHAW

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

80.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Transaction ID: B0007515000005L11A1

Full Name (Last, First, Middle Initial)

C. JERRY W. BRADSHAW

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 3 1 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Transaction ID: B0007735000005L11A1

SUBTOTAL of Receipts This Page (optional)

110.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM A. BRESKIN

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 06 / 2002

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000753S000006L11A1

Full Name (Last, First, Middle Initial)

B. WILLIAM A. BRESKIN

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 23 / 2002

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000762S000006L11A1

Full Name (Last, First, Middle Initial)

C. JAMES M. BRITTEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 23 / 2002

Amount of Each Receipt this Period

30.00

Name of Employer
BC/BS OF ILLINOIS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000757S000008L11A1

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ALLAN J. BROWN

Mailing Address

108 WESTERN POINTE DRIVE

City

COLUMBIA

State

SC

Zip Code

29229

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGER, BUSINESS SERVICES

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Transaction ID: B0007676000025L11A1

Full Name (Last, First, Middle Initial)

B. ALLAN J. BROWN

Mailing Address

108 WESTERN POINTE DRIVE

City

COLUMBIA

State

SC

Zip Code

29229

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGER, BUSINESS SERVICES

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Transaction ID: B0007686000025L11A1

Full Name (Last, First, Middle Initial)

C. ALLAN J. BROWN

Mailing Address

108 WESTERN POINTE DRIVE

City

COLUMBIA

State

SC

Zip Code

29229

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGER, BUSINESS SERVICES

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Transaction ID: B0007696000025L11A1

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
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☐ 13	☐ 14	☐ 15	☐ 16	

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ANDREW F. BROWN

Mailing Address

3611 RANCH ROADN.W.

APT. 21-5

City

State

Zip Code

COLUMBIA

SC

29206

Date of Receipt

MM / DD / YYYY
12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

7.04

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Aggregate Year-to-Date ▼

Other (specify) ▼

204.16

Transaction ID: B0007676000026L11A1

Full Name (Last, First, Middle Initial)

B. ANDREW F. BROWN

Mailing Address

3611 RANCH ROADN.W.

APT. 21-5

City

State

Zip Code

COLUMBIA

SC

29206

Date of Receipt

MM / DD / YYYY
12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

7.04

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Aggregate Year-to-Date ▼

Other (specify) ▼

204.16

Transaction ID: B0007686000026L11A1

Full Name (Last, First, Middle Initial)

C. ANDREW F. BROWN

Mailing Address

3611 RANCH ROADN.W.

APT. 21-5

City

State

Zip Code

COLUMBIA

SC

29206

Date of Receipt

MM / DD / YYYY
12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

7.04

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Aggregate Year-to-Date ▼

Other (specify) ▼

204.16

Transaction ID: B0007696000026L11A1

SUBTOTAL of Receipts This Page (optional)

21.12

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL NEAL BURKHEAD

Mailing Address

103 CYPRESS RIDGE CIRCLE

City

COLUMBIA

State

SC

Zip Code

29229

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

AVP MEDICARE

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000767S000031L11A1

Full Name (Last, First, Middle Initial)

B. MICHAEL NEAL BURKHEAD

Mailing Address

103 CYPRESS RIDGE CIRCLE

City

COLUMBIA

State

SC

Zip Code

29229

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

AVP MEDICARE

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000768S000031L11A1

Full Name (Last, First, Middle Initial)

C. MICHAEL NEAL BURKHEAD

Mailing Address

103 CYPRESS RIDGE CIRCLE

City

COLUMBIA

State

SC

Zip Code

29229

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

AVP MEDICARE

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000769S000031L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

A. Full Name (Last, First, Middle Initial)
ANN T. BURNETT
Mailing Address
2 TOMBEE COURT
City State Zip Code
COLUMBIA SC 29209
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF SOUTH CAROLINA VICE PRESIDENT
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 284.49

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period
9.81

PAYROLL DEDUCTION

Transaction ID: B0007676S000032L11A1

B. Full Name (Last, First, Middle Initial)
ANN T. BURNETT
Mailing Address
2 TOMBEE COURT
City State Zip Code
COLUMBIA SC 29209
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF SOUTH CAROLINA VICE PRESIDENT
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 284.49

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period
9.81

PAYROLL DEDUCTION

Transaction ID: B0007686S000032L11A1

C. Full Name (Last, First, Middle Initial)
ANN T. BURNETT
Mailing Address
2 TOMBEE COURT
City State Zip Code
COLUMBIA SC 29209
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF SOUTH CAROLINA VICE PRESIDENT
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 284.49

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period
9.81

PAYROLL DEDUCTION

Transaction ID: B0007696S000032L11A1

SUBTOTAL of Receipts This Page (optional) **29.43**

TOTAL This Period (last page this line number only) **29.43**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. CHARLES K. BUTLER

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MONTANA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Transaction ID: B0007496000010L11A1

Full Name (Last, First, Middle Initial)

B. TERRI BUTLER

Mailing Address

121 RUNNEYMEDE DRIVE

City

State

Zip Code

BLYTHEWOOD

SC

29016

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer
BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation
DIRECTOR, IS

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B0007678000034L11A1

Full Name (Last, First, Middle Initial)

C. TERRI BUTLER

Mailing Address

121 RUNNEYMEDE DRIVE

City

State

Zip Code

BLYTHEWOOD

SC

29016

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer
BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation
DIRECTOR, IS

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B0007688000034L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. TERRI BUTLER

Mailing Address

121 RUNNEYMEDE DRIVE

City

State

Zip Code

BLYTHEWOOD

SC

29016

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR, IS

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B0007696000034L11A1

Full Name (Last, First, Middle Initial)

B. ROBERT D. CABE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period

60.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Transaction ID: B0007515000006L11A1

Full Name (Last, First, Middle Initial)

C. ROBERT D. CABE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 3 1 / 2 0 0 2

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Transaction ID: B0007735000006L11A1

SUBTOTAL of Receipts This Page (optional)

110.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. HAROLD H. CANTRELL

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

16.20

Name of Employer
BC/BS OF TENNESSEE

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

210.60

Transaction ID: B0007506000016L11A1

Full Name (Last, First, Middle Initial)

B. HAROLD H. CANTRELL

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 3 1 2 0 0 2

Amount of Each Receipt this Period

16.20

Name of Employer
BC/BS OF TENNESSEE

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

210.60

Transaction ID: B0007718000016L11A1

Full Name (Last, First, Middle Initial)

C. STEPHEN T. CARTER

Mailing Address

207 BRIDGECREEK DR.

City

State

Zip Code

COLUMBIA

SC

29229

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 2 0 0 2

Amount of Each Receipt this Period

7.80

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation
DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

226.20

Transaction ID: B0007678000040L11A1

SUBTOTAL of Receipts This Page (optional)

40.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. STEPHEN T. CARTER

Mailing Address

207 BRIDGECREEK DR.

City

COLUMBIA

State

SC

Zip Code

29229

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

7.80

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

226.20

Transaction ID: B000768S000040L11A1

Full Name (Last, First, Middle Initial)

B. STEPHEN T. CARTER

Mailing Address

207 BRIDGECREEK DR.

City

COLUMBIA

State

SC

Zip Code

29229

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

7.80

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

226.20

Transaction ID: B000768S000040L11A1

Full Name (Last, First, Middle Initial)

C. ROSELYN G. CATOE

Mailing Address

520 WOTAN RD.

City

COLUMBIA

State

SC

Zip Code

29229

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Transaction ID: B000767S000042L11A1

SUBTOTAL of Receipts This Page (optional)

35.60

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or 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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. RDSLYN.C. CATOE

Mailing Address

520 WOTAN RD.

City

State

Zip Code

COLUMBIA

SC

29229

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Transaction ID: B000768S000042L11A1

Full Name (Last, First, Middle Initial)

B. RDSLYN.C. CATOE

Mailing Address

520 WOTAN RD.

City

State

Zip Code

COLUMBIA

SC

29229

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Transaction ID: B000768S000042L11A1

Full Name (Last, First, Middle Initial)

C. JOHNGERISANO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 06 / 2002

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000753S000009L11A1

SUBTOTAL of Receipts This Page (optional) ▶

50.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOHN CERISANO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

12 / 23 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0007626000009L11A1

Full Name (Last, First, Middle Initial)

B. FRANK CHASE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

12 / 18 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

ADVANCED HEALTH SYSTEMS, INC.

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Transaction ID: B0007545000001L11A1

Full Name (Last, First, Middle Initial)

C. MARY J. CHEPELSKY

Mailing Address

706 LUTTIE ROAD

City

State

Zip Code

MYRTLE BEACH

SC

29566

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B00076750000044L11A1

SUBTOTAL of Receipts This Page (optional) ▶

40.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MARY J. CHEPELSKY

Mailing Address

706 LUTTIE ROAD

City

State

Zip Code

MYRTLE BEACH

SC

29588

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000768S000044L11A1

Full Name (Last, First, Middle Initial)

B. MARY J. CHEPELSKY

Mailing Address

706 LUTTIE ROAD

City

State

Zip Code

MYRTLE BEACH

SC

29588

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000768S000044L11A1

Full Name (Last, First, Middle Initial)

C. WILLIAM JAMES GOLBOURNE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 06 / 2002

Amount of Each Receipt this Period

25.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR VP

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Transaction ID: B000753S000010L11A1

SUBTOTAL of Receipts This Page (optional) ▶

45.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM JAMES COLBOURNE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR VP

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Transaction ID: B000762S000010L11A1

Full Name (Last, First, Middle Initial)

B. JAY MICHAEL COOK

Mailing Address

X

City

State

Zip Code

X

MI

99999

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 8 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

14.00

Name of Employer

BC/BS ASSOCIATION

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Transaction ID: B000753S000011L11A1

Full Name (Last, First, Middle Initial)

C. JAY MICHAEL COOK

Mailing Address

X

City

State

Zip Code

X

MI

99999

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

14.00

Name of Employer

BC/BS ASSOCIATION

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Transaction ID: B000762S000011L11A1

SUBTOTAL of Receipts This Page (optional)

53.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. TAYLOR I. COOK

Mailing Address

2108 CITATION COURT

City

State

Zip Code

MOUNT PLEASANT

SC

29464

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

13.85

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

CHIEF MEDICAL OFFICER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

401.65

Transaction ID: B0007676000052L11A1

Full Name (Last, First, Middle Initial)

B. TAYLOR I. COOK

Mailing Address

2108 CITATION COURT

City

State

Zip Code

MOUNT PLEASANT

SC

29464

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

13.85

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

CHIEF MEDICAL OFFICER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

401.65

Transaction ID: B0007688000052L11A1

Full Name (Last, First, Middle Initial)

C. TAYLOR I. COOK

Mailing Address

2108 CITATION COURT

City

State

Zip Code

MOUNT PLEASANT

SC

29464

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

13.85

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

CHIEF MEDICAL OFFICER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

401.65

Transaction ID: B0007689000052L11A1

SUBTOTAL of Receipts This Page (optional)

41.55

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. BRYANNE L. CURRY

Mailing Address

723 SIMS AVENUE

City

COLUMBIA

State

SC

Zip Code

29205

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR, NET SYSTEMS

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000767S000057L11A1

Full Name (Last, First, Middle Initial)

B. BRYANNE L. CURRY

Mailing Address

723 SIMS AVENUE

City

COLUMBIA

State

SC

Zip Code

29205

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR, NET SYSTEMS

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000768S000057L11A1

Full Name (Last, First, Middle Initial)

C. BRYANNE L. CURRY

Mailing Address

723 SIMS AVENUE

City

COLUMBIA

State

SC

Zip Code

29205

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR, NET SYSTEMS

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000769S000057L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JUDITH M. DAVIS

Mailing Address

1309 WELLINGTON DRIVE

City

COLUMBIA

State

SC

Zip Code

29204

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

16.92

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VP & CORP GENERAL COUNSEL

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

490.68

Transaction ID: B000767S000060L11A1

Full Name (Last, First, Middle Initial)

B. JUDITH M. DAVIS

Mailing Address

1309 WELLINGTON DRIVE

City

COLUMBIA

State

SC

Zip Code

29204

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

16.92

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VP & CORP GENERAL COUNSEL

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

490.68

Transaction ID: B000768S000060L11A1

Full Name (Last, First, Middle Initial)

C. JUDITH M. DAVIS

Mailing Address

1309 WELLINGTON DRIVE

City

COLUMBIA

State

SC

Zip Code

29204

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

16.92

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VP & CORP GENERAL COUNSEL

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

490.68

Transaction ID: B000769S000060L11A1

SUBTOTAL of Receipts This Page (optional)

50.76

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. LUCINDA M. DAWSON

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

16.20

Name of Employer
BC/BS OF TENNESSEE

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

210.60

Transaction ID: B000750S000022L11A1

Full Name (Last, First, Middle Initial)

B. LUCINDA M. DAWSON

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 3 1 2 0 0 2

Amount of Each Receipt this Period

16.20

Name of Employer
BC/BS OF TENNESSEE

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

210.60

Transaction ID: B000771S000022L11A1

Full Name (Last, First, Middle Initial)

C. DAVID LEE DEAL

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

16.67

Name of Employer
BC/BS OF TENNESSEE

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

216.71

Transaction ID: B000750S000023L11A1

SUBTOTAL of Receipts This Page (optional)

49.07

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DAVID LEE DEAL

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 3 1 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

16.87

Name of Employer
BC/BS OF TENNESSEE

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

216.71

Transaction ID: B0007716000023L11A1

Full Name (Last, First, Middle Initial)

B. KATHY DIDAWICK

Mailing Address

3015 S 7TH STREET

City

State

Zip Code

ARLINGTON

DC

22204

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 6 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer
BLUE CROSS BLUE SHIELD ASSOCIATION

Occupation
TREASURER, BLUE PAC

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Transaction ID: B000753S000013L11A1

Full Name (Last, First, Middle Initial)

C. KATHY DIDAWICK

Mailing Address

3015 S 7TH STREET

City

State

Zip Code

ARLINGTON

DC

22204

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer
BLUE CROSS BLUE SHIELD ASSOCIATION

Occupation
TREASURER, BLUE PAC

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Transaction ID: B000762S000013L11A1

SUBTOTAL of Receipts This Page (optional)

96.67

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. PAUL A. DYKES

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 6 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer
BC/BS OF LOUISIANA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Transaction ID: B0007556000003L11A1

Full Name (Last, First, Middle Initial)

B. JOHN M. EARLEY

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer
BLUE CROSS BLUE SHIELD

Occupation
COACH, CORPORATE DEVELOPMENT

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Transaction ID: B0007495000003L11A1

Full Name (Last, First, Middle Initial)

C. JOHN T. ERICKSEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 6 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer
BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation
EXEC. DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Transaction ID: B0007535000014L11A1

SUBTOTAL of Receipts This Page (optional)

55.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOHN T. ERICKSEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

12 / 23 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXEC. DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Transaction ID: B0007626000014L11A1

Full Name (Last, First, Middle Initial)

B. ANDREW A. EVANS

Mailing Address

2036 WETHERSFIELD DR.

City

State

Zip Code

FLORENCE

SC

29501

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Transaction ID: B0007675000070L11A1

Full Name (Last, First, Middle Initial)

C. ANDREW A. EVANS

Mailing Address

2036 WETHERSFIELD DR.

City

State

Zip Code

FLORENCE

SC

29501

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Transaction ID: B0007685000070L11A1

SUBTOTAL of Receipts This Page (optional) ▶

40.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ANDREW A. EVANS

Mailing Address

2038 WETHERSFIELD DR.

City

FLORENCE

State

SC

Zip Code

29501

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation
DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Transaction ID: B0007696000070L11A1

Full Name (Last, First, Middle Initial)

B. JORDAN D. EVANS

Mailing Address

2618 HARLESTON GREEN

City

FLORENCE

State

SC

Zip Code

29505

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation
ASST. VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Transaction ID: B0007678000071L11A1

Full Name (Last, First, Middle Initial)

C. JORDAN D. EVANS

Mailing Address

2618 HARLESTON GREEN

City

FLORENCE

State

SC

Zip Code

29505

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation
ASST. VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Transaction ID: B0007688000071L11A1

SUBTOTAL of Receipts This Page (optional)

40.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JORDAN D. EVANS

Mailing Address

2618 HARLESTON GREEN

City

State

Zip Code

FLORENCE

SC

29505

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

ASST. VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Transaction ID: B000769S000071L11A1

Full Name (Last, First, Middle Initial)

B. WILLIAM EVERLEY

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period

16.67

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

216.71

Transaction ID: B000750S000025L11A1

Full Name (Last, First, Middle Initial)

C. WILLIAM EVERLEY

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 3 1 / 2 0 0 2

Amount of Each Receipt this Period

16.67

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

216.71

Transaction ID: B000771S000025L11A1

SUBTOTAL of Receipts This Page (optional)

48.34

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. THOMAS FAULDS

Mailing Address

312 WEST SPINGS ROAD

City

State

Zip Code

COLUMBIA

SC

29223

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

3.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

PRESIDENT & COO

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Transaction ID: B000767S000073L11A1

Full Name (Last, First, Middle Initial)

B. THOMAS FAULDS

Mailing Address

312 WEST SPINGS ROAD

City

State

Zip Code

COLUMBIA

SC

29223

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

3.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

PRESIDENT & COO

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Transaction ID: B000768S000073L11A1

Full Name (Last, First, Middle Initial)

C. THOMAS FAULDS

Mailing Address

312 WEST SPINGS ROAD

City

State

Zip Code

COLUMBIA

SC

29223

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

3.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

PRESIDENT & COO

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Transaction ID: B000769S000073L11A1

SUBTOTAL of Receipts This Page (optional) ▶

9.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. REGINA H. FAVORS

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

30.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000751S000009L11A1

Full Name (Last, First, Middle Initial)

B. REGINA H. FAVORS

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 3 1 2 0 0 2

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000773S000009L11A1

Full Name (Last, First, Middle Initial)

C. THOMAS FENTER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 6 2 0 0 2

Amount of Each Receipt this Period

60.00

Name of Employer

BC/BS OF MISSISSIPPI

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Transaction ID: B000754S000009L11A1

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. SUSAN G. FLYGARE

Mailing Address

5322 RUSSELL AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55410

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007416000003L11A1

Full Name (Last, First, Middle Initial)

B. SUSAN G. FLYGARE

Mailing Address

5322 RUSSELL AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55410

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007426000003L11A1

Full Name (Last, First, Middle Initial)

C. SUSAN G. FLYGARE

Mailing Address

5322 RUSSELL AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55410

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007436000003L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. SUSAN G. FLYGARE

Mailing Address

5322 RUSSELL AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55410

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B000744S000003L11A1

Full Name (Last, First, Middle Initial)

B. SUSAN G. FLYGARE

Mailing Address

5322 RUSSELL AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55410

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B000745S000003L11A1

Full Name (Last, First, Middle Initial)

C. SUSAN G. FLYGARE

Mailing Address

5322 RUSSELL AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55410

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B000747S000003L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. SUSAN G. FLYGARE

Mailing Address

5322 RUSSELL AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55410

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B000748S000003L11A1

Full Name (Last, First, Middle Initial)

B. SUSAN G. FLYGARE

Mailing Address

5322 RUSSELL AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55410

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B000764S000003L11A1

Full Name (Last, First, Middle Initial)

C. ALISSA T. FOX

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 6 2 0 0 2

Amount of Each Receipt this Period

20.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXEC. DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Transaction ID: B000753S000015L11A1

SUBTOTAL of Receipts This Page (optional)

40.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ALISSA T. FOX

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 2 0 0 2

Amount of Each Receipt this Period

20.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXEC. DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Transaction ID: B0007626000015L11A1

Full Name (Last, First, Middle Initial)

B. KAYLIN FRAPPIER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 2 0 0 2

Amount of Each Receipt this Period

20.00

Name of Employer

NORIDIAN-BC/BS OF NORTH DAKOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000758S000014L11A1

Full Name (Last, First, Middle Initial)

C. STEPHEN GAMMARINO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 6 2 0 0 2

Amount of Each Receipt this Period

45.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Transaction ID: B000753S000016L11A1

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. STEPHEN GAMMARINO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

45.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Transaction ID: B0007626000016L11A1

Full Name (Last, First, Middle Initial)

B. JOYCE C. GANDY

Mailing Address

2106 ELDERBERRY DRIVE

City

State

Zip Code

FLORENCE

SC

29505

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR, MEDICAL AFFAIRS

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Transaction ID: B0007675000088L11A1

Full Name (Last, First, Middle Initial)

C. JOYCE C. GANDY

Mailing Address

2106 ELDERBERRY DRIVE

City

State

Zip Code

FLORENCE

SC

29505

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR, MEDICAL AFFAIRS

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Transaction ID: B0007685000088L11A1

SUBTOTAL of Receipts This Page (optional)

85.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOYCE C. GANDY

Mailing Address

2108 ELDERBERRY DRIVE

City

State

Zip Code

FLORENCE

SC

29505

FEC ID number of contributing
federal political committee.

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR, MEDICAL AFFAIRS

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Transaction ID: B000769S000038L11A1

Full Name (Last, First, Middle Initial)

B. JOAN M. GARDNER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 2

Amount of Each Receipt this Period

22.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EX. DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Transaction ID: B000753S000017L11A1

Full Name (Last, First, Middle Initial)

C. JOAN M. GARDNER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

22.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EX. DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Transaction ID: B000762S000017L11A1

SUBTOTAL of Receipts This Page (optional)

64.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. LAUNNIE GINN

Mailing Address

P.O. BOX 1043

City

JACKSON

State

MS

Zip Code

39215-1043

Date of Receipt

12 / 16 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF MISSISSIPPI

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Transaction ID: B000754S000004L11A1

Full Name (Last, First, Middle Initial)

B. STEVEN JAMES GLOWIAK

Mailing Address

1310 G STREET, NW

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

12 / 06 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

30.00

Name of Employer

BC/BS ASSOCIATION

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Transaction ID: B000753S0000020L11A1

Full Name (Last, First, Middle Initial)

C. STEVEN JAMES GLOWIAK

Mailing Address

1310 G STREET, NW

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

12 / 23 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

30.00

Name of Employer

BC/BS ASSOCIATION

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Transaction ID: B000762S0000020L11A1

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM R. GOLD

Mailing Address

1717 DUPONT AVE. S.

City

State

Zip Code

MINNEAPOLIS

MN

55403

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 12 / 2002

Amount of Each Receipt this Period

7.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Transaction ID: B0007416000004L11A1

Full Name (Last, First, Middle Initial)

B. WILLIAM R. GOLD

Mailing Address

1717 DUPONT AVE. S.

City

State

Zip Code

MINNEAPOLIS

MN

55403

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 12 / 2002

Amount of Each Receipt this Period

7.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Transaction ID: B0007426000004L11A1

Full Name (Last, First, Middle Initial)

C. WILLIAM R. GOLD

Mailing Address

1717 DUPONT AVE. S.

City

State

Zip Code

MINNEAPOLIS

MN

55403

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 12 / 2002

Amount of Each Receipt this Period

7.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Transaction ID: B0007436000004L11A1

SUBTOTAL of Receipts This Page (optional)

21.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM R. GOLD

Mailing Address

1717 DUPONT AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55403

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

7.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Transaction ID: B000744S000004L11A1

Full Name (Last, First, Middle Initial)

B. WILLIAM R. GOLD

Mailing Address

1717 DUPONT AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55403

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

7.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Transaction ID: B000745S000004L11A1

Full Name (Last, First, Middle Initial)

C. WILLIAM R. GOLD

Mailing Address

1717 DUPONT AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55403

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

7.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Transaction ID: B000747S000004L11A1

SUBTOTAL of Receipts This Page (optional)

21.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM R. GOLD

Mailing Address

1717 DUPONT AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55403

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

7.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Transaction ID: B0007486000004L11A1

Full Name (Last, First, Middle Initial)

B. WILLIAM R. GOLD

Mailing Address

1717 DUPONT AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55403

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

7.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Transaction ID: B0007645000004L11A1

Full Name (Last, First, Middle Initial)

C. BARBARA J. GRANT

Mailing Address

1310 G STREET, NW

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 6 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

14.00

Name of Employer
BLUE CROSS BLUE SHIELD ASSOCIATION

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

236.00

Transaction ID: B0007535000021L11A1

SUBTOTAL of Receipts This Page (optional)

28.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. BARBARA J. GRANT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

Amount of Each Receipt this Period

14.00

Name of Employer

BLUE CROSS BLUE SHIELD ASSOCIATION

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Transaction ID: B0007626000021L11A1

Full Name (Last, First, Middle Initial)

B. VICKY B. GREGG

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period

75.00

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Transaction ID: B000750S000035L11A1

Full Name (Last, First, Middle Initial)

C. VICKY B. GREGG

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 3 1 / 2 0 0 2

Amount of Each Receipt this Period

75.00

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Transaction ID: B000771S000035L11A1

SUBTOTAL of Receipts This Page (optional)

164.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. PATRICIA A. GRIFFIN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer
BC/BS OF ILLINOIS

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Transaction ID: B000757S000046L11A1

Full Name (Last, First, Middle Initial)

B. WILLIAM M. GRIGGS

Mailing Address

8 WHEATSTONE CT.

City

State

Zip Code

COLUMBIA

SC

29229

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

8.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation
VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

307.00

Transaction ID: B000767S000094L11A1

Full Name (Last, First, Middle Initial)

C. WILLIAM M. GRIGGS

Mailing Address

8 WHEATSTONE CT.

City

State

Zip Code

COLUMBIA

SC

29229

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

8.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation
VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

307.00

Transaction ID: B000768S000094L11A1

SUBTOTAL of Receipts This Page (optional)

36.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM M. GRIGGS

Mailing Address

8 WHEATSTONE CT.

City

COLUMBIA

State

SC

Zip Code

29229

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

8.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

307.00

Transaction ID: B000769S000094L11A1

Full Name (Last, First, Middle Initial)

B. CHRISTINA GROSZER

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

12 / 08 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000753S000022L11A1

Full Name (Last, First, Middle Initial)

C. CHRISTINA GROSZER

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

12 / 23 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000762S000022L11A1

SUBTOTAL of Receipts This Page (optional) ▶

28.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. GARY D. HACKLEY

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

Amount of Each Receipt this Period

40.00

Name of Employer
BC/BS OF ILLINOIS

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Transaction ID: B000757S000047L11A1

Full Name (Last, First, Middle Initial)

B. MICHAEL HAMERLIK

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

Amount of Each Receipt this Period

25.00

Name of Employer
NORIDIAN-BC/BS OF NORTH DAKOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Transaction ID: B000758S000018L11A1

Full Name (Last, First, Middle Initial)

C. JUSTINE HANDELMAN

Mailing Address

3904 FERNDAL AVENUE

City

State

Zip Code

KENSINGTON

MD

20815

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 6 / 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer
BLUE CROSS BLUE SHIELD ASSOCIATION

Occupation
EXECUTIVE REPRESENTATIVE

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000753S000023L11A1

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JUSTINE HANDELMAN

Mailing Address

3304 FERNDAL AVENUE

City

KENSINGTON

State

MD

Zip Code

20815

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS BLUE SHIELD ASSOCIATION

Occupation

EXECUTIVE REPRESENTATIVE

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0007626000023L11A1

Full Name (Last, First, Middle Initial)

B. MELVIN D. HARDY

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

24.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Transaction ID: B0007515000013L11A1

Full Name (Last, First, Middle Initial)

C. MELVIN D. HARDY

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 3 1 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

18.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Transaction ID: B0007735000013L11A1

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. THOMASHARTNETT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 12 / 2002

Amount of Each Receipt this Period

34.75

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1042.50

Transaction ID: B000746S000009L11A1

Full Name (Last, First, Middle Initial)

B. THOMASHARTNETT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 23 / 2002

Amount of Each Receipt this Period

34.75

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1042.50

Transaction ID: B000760S000009L11A1

Full Name (Last, First, Middle Initial)

C. THOMASHARTNETT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

34.75

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1042.50

Transaction ID: B000766S000009L11A1

SUBTOTAL of Receipts This Page (optional)

104.25

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MICHELLE D. HASTINGS

Mailing Address

317 SOUTH OAK ROAD

City

State

Zip Code

FLORENCE

SC

29505

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Transaction ID: B000767S000101L11A1

Full Name (Last, First, Middle Initial)

B. MICHELLE D. HASTINGS

Mailing Address

317 SOUTH OAK ROAD

City

State

Zip Code

FLORENCE

SC

29505

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Transaction ID: B000768S000101L11A1

Full Name (Last, First, Middle Initial)

C. MICHELLE D. HASTINGS

Mailing Address

317 SOUTH OAK ROAD

City

State

Zip Code

FLORENCE

SC

29505

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Transaction ID: B000769S000101L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL A. HAYES

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 6 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

30.00

Name of Employer

BC/BS OF LOUISIANA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Transaction ID: B0007556000006L11A1

Full Name (Last, First, Middle Initial)

B. WILLIAM R. HEAD

Mailing Address

501 SLATERS LANE

1002

City

State

Zip Code

ALEXANDRIA

VA

22314

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 6 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS ASSOCIATION

Occupation

DIRECTOR, CONGRESSIONAL RELATION

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B00075380000026L11A1

Full Name (Last, First, Middle Initial)

C. WILLIAM R. HEAD

Mailing Address

501 SLATERS LANE

1002

City

State

Zip Code

ALEXANDRIA

VA

22314

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS ASSOCIATION

Occupation

DIRECTOR, CONGRESSIONAL RELATION

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B00076280000026L11A1

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM ANDREW HENSLEY

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 6 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

22.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VP

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Transaction ID: B000753S000028L11A1

Full Name (Last, First, Middle Initial)

B. WILLIAM ANDREW HENSLEY

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

22.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VP

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Transaction ID: B000762S000028L11A1

Full Name (Last, First, Middle Initial)

C. CHARLES L. HIGGINS

Mailing Address

505 MEADOW BROOK ROAD

City

State

Zip Code

COLUMBIA

SC

29223

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

ETHICS OFFICER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Transaction ID: B000767S000105L11A1

SUBTOTAL of Receipts This Page (optional)

64.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. CHARLES L. HIGGINS

Mailing Address

505 MEADOW BROOK ROAD

City

COLUMBIA

State

SC

Zip Code

29223

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

ETHICS OFFICER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Transaction ID: B000768S000105L11A1

Full Name (Last, First, Middle Initial)

B. CHARLES L. HIGGINS

Mailing Address

505 MEADOW BROOK ROAD

City

COLUMBIA

State

SC

Zip Code

29223

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

ETHICS OFFICER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Transaction ID: B000768S000105L11A1

Full Name (Last, First, Middle Initial)

C. LISA K. HILBOURNE

Mailing Address

4520 W. HWY 76

City

MARION

State

SC

Zip Code

29571

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

5.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Transaction ID: B000767S000108L11A1

SUBTOTAL of Receipts This Page (optional) ▶

45.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. LISA K. HILBOURNE

Mailing Address

4520 W. HWY 7B

City

State

Zip Code

MARION

SC

29571

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 2 0 0 2

Amount of Each Receipt this Period

5.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Transaction ID: B000768S000106L11A1

Full Name (Last, First, Middle Initial)

B. LISA K. HILBOURNE

Mailing Address

4520 W. HWY 7B

City

State

Zip Code

MARION

SC

29571

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 2 0 0 2

Amount of Each Receipt this Period

5.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Transaction ID: B000768S000106L11A1

Full Name (Last, First, Middle Initial)

C. TRESMOTT N. HINTON

Mailing Address

112 OAK TRACE COURT

City

State

Zip Code

CHAPIN

SC

29036

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 2 0 0 2

Amount of Each Receipt this Period

7.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Transaction ID: B000767S000108L11A1

SUBTOTAL of Receipts This Page (optional)

17.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. TRESMOTT N. HINTON

Mailing Address

112 OAK TRACE COURT

City

CHAPIN

State

SC

Zip Code

29036

Date of Receipt

N M / D C / Y Y Y Y
1 2 / 2 7 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

7.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Transaction ID: B000768S000108L11A1

Full Name (Last, First, Middle Initial)

B. TRESMOTT N. HINTON

Mailing Address

112 OAK TRACE COURT

City

CHAPIN

State

SC

Zip Code

29036

Date of Receipt

N M / D C / Y Y Y Y
1 2 / 2 7 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

7.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Transaction ID: B000768S000108L11A1

Full Name (Last, First, Middle Initial)

C. ROBIN S. HOLLAND

Mailing Address

218 FOX CATCHER DR.

City

MYRTLE BEACH

State

SC

Zip Code

29566

Date of Receipt

N M / D C / Y Y Y Y
1 2 / 2 7 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000767S000112L11A1

SUBTOTAL of Receipts This Page (optional)

24.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ROBIN S. HOLLAND

Mailing Address

218 FOX CATCHER DR.

City

MYRTLE BEACH

State

SC

Zip Code

29588

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000768S000112L11A1

Full Name (Last, First, Middle Initial)

B. ROBIN S. HOLLAND

Mailing Address

218 FOX CATCHER DR.

City

MYRTLE BEACH

State

SC

Zip Code

29588

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000768S000112L11A1

Full Name (Last, First, Middle Initial)

C. CHERYL HOWE

Mailing Address

1901 MAIN STREET

City

BUFFALO

State

NY

Zip Code

14240

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Transaction ID: B000746S000010L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. CHERYL HOWE

Mailing Address

1801 MAIN STREET

City

State

Zip Code

BUFFALO

NY

14240

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Transaction ID: B000760S000010L11A1

Full Name (Last, First, Middle Initial)

B. CHERYL HOWE

Mailing Address

1801 MAIN STREET

City

State

Zip Code

BUFFALO

NY

14240

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Transaction ID: B000766S000010L11A1

Full Name (Last, First, Middle Initial)

C. BRUCE W. HUGHES

Mailing Address

124 COVE COURT

City

State

Zip Code

IRMO

SC

29065

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

17.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

EXEC VP COO, PG&A

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

473.00

Transaction ID: B000767S000114L11A1

SUBTOTAL of Receipts This Page (optional)

37.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. BRUCE W. HUGHES

Mailing Address

124 COVE COURT

City

State

Zip Code

IRMO

SC

29063

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

17.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

EXEC VP COO, PGBA

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

473.00

Transaction ID: B000768S000114L11A1

Full Name (Last, First, Middle Initial)

B. BRUCE W. HUGHES

Mailing Address

124 COVE COURT

City

State

Zip Code

IRMO

SC

29063

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

17.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

EXEC VP COO, PGBA

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

473.00

Transaction ID: B000768S000114L11A1

Full Name (Last, First, Middle Initial)

C. DAVID HUNTINGTON

Mailing Address

P.O. BOX 210

City

State

Zip Code

LITTLE MTN

SC

29075

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

9.15

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VP MAJOR ACCOUNTS

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

265.35

Transaction ID: B000767S000116L11A1

SUBTOTAL of Receipts This Page (optional)

43.15

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DAVID HUNTINGTON

Mailing Address

P.O. BOX 210

City

State

Zip Code

LITTLE MTN

SC

29075

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

9.15

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VP MAJOR ACCOUNTS

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

265.35

Transaction ID: B000768S000116L11A1

Full Name (Last, First, Middle Initial)

B. DAVID HUNTINGTON

Mailing Address

P.O. BOX 210

City

State

Zip Code

LITTLE MTN

SC

29075

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

9.15

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VP MAJOR ACCOUNTS

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

265.35

Transaction ID: B000768S000116L11A1

Full Name (Last, First, Middle Initial)

C. ROBERT G. IADICICCO

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 6 / 2 0 0 2

Amount of Each Receipt this Period

12.00

Name of Employer
BCBS ASSOCIATION

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Transaction ID: B000753S000029L11A1

SUBTOTAL of Receipts This Page (optional)

30.30

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

A. Full Name (Last, First, Middle Initial) ROBERT G. IADICICCO		Date of Receipt N M / D E / Y Y Y Y 1 2 / 2 3 / 2 0 0 2	
Mailing Address 1310 G STREET, N.W.			
City	State	Zip Code	
WASHINGTON	DC	20005	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 12.00	
Name of Employer BC/BS ASSOCIATION		Occupation HEALTH INSURER	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 216.00	
		Transaction ID: B0007626000029L11A1	
B. Full Name (Last, First, Middle Initial) DON INGALLS		Date of Receipt N M / D E / Y Y Y Y 1 2 / 1 2 / 2 0 0 2	
Mailing Address 1310 G STREET, N.W.			
City	State	Zip Code	
WASHINGTON	DC	20001	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 10.00	
Name of Employer BC/BS OF WESTERN NEW YORK		Occupation HEALTH INSURER	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	
		Transaction ID: B0007468000005L11A1	
C. Full Name (Last, First, Middle Initial) DON INGALLS		Date of Receipt N M / D E / Y Y Y Y 1 2 / 2 3 / 2 0 0 2	
Mailing Address 1310 G STREET, N.W.			
City	State	Zip Code	
WASHINGTON	DC	20001	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 10.00	
Name of Employer BC/BS OF WESTERN NEW YORK		Occupation HEALTH INSURER	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	
		Transaction ID: B0007608000005L11A1	

SUBTOTAL of Receipts This Page (optional) **32.00**

TOTAL This Period (last page this line number only) **32.00**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

A. Full Name (Last, First, Middle Initial) DON INGALLS		Date of Receipt N M / D E / Y Y Y Y 1 2 / 2 7 / 2 0 0 2	
Mailing Address 1310 G STREET, N.W. City State Zip Code WASHINGTON DC 20001		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee.			
Name of Employer BC/BS OF WESTERN NEW YORK		Occupation HEALTH INSURER	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	
		Transaction ID: B000766S000005L11A1	
B. Full Name (Last, First, Middle Initial) GEORGE L. JOHNSON		Date of Receipt N M / D E / Y Y Y Y 1 2 / 2 7 / 2 0 0 2	
Mailing Address 217 WHITE BIRCH CIRCLE City State Zip Code COLUMBIA SC 29223		Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee.			
Name of Employer BC/BS OF SOUTH CAROLINA		Occupation VICE PRESIDENT	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 435.00	
		Transaction ID: B000767S000121L11A1	
C. Full Name (Last, First, Middle Initial) GEORGE L. JOHNSON		Date of Receipt N M / D E / Y Y Y Y 1 2 / 2 7 / 2 0 0 2	
Mailing Address 217 WHITE BIRCH CIRCLE City State Zip Code COLUMBIA SC 29223		Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee.			
Name of Employer BC/BS OF SOUTH CAROLINA		Occupation VICE PRESIDENT	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 435.00	
		Transaction ID: B000768S000121L11A1	

SUBTOTAL of Receipts This Page (optional) ▶ **40.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. GEORGE L. JOHNSON

Mailing Address

217 WHITE BIRCH CIRCLE

City

COLUMBIA

State

SC

Zip Code

29223

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Transaction ID: B000769S000121L11A1

Full Name (Last, First, Middle Initial)

B. HUGHIE W. JOHNSON

Mailing Address

4332 THIGPEN RD.

City

OLANTA

State

SC

Zip Code

29114

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

7.50

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

217.50

Transaction ID: B000767S000122L11A1

Full Name (Last, First, Middle Initial)

C. HUGHIE W. JOHNSON

Mailing Address

4332 THIGPEN RD.

City

OLANTA

State

SC

Zip Code

29114

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

7.50

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

217.50

Transaction ID: B000768S000122L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. HUGHIE W. JOHNSON

Mailing Address

4332 THIGPEN RD.

City

OLANTA

State

SC

Zip Code

29114

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

7.50

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

217.50

Transaction ID: B0007696000122L11A1

Full Name (Last, First, Middle Initial)

B. ROBERT W. JOHNSON

Mailing Address

408 CEDAR ROAD

City

WINDSOR

State

SC

Zip Code

29056

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.39

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VP

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

446.31

Transaction ID: B0007678000123L11A1

Full Name (Last, First, Middle Initial)

C. ROBERT W. JOHNSON

Mailing Address

408 CEDAR ROAD

City

WINDSOR

State

SC

Zip Code

29056

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.39

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VP

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

446.31

Transaction ID: B0007688000123L11A1

SUBTOTAL of Receipts This Page (optional)

38.28

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ROBERT W. JOHNSON

Mailing Address

408 CEDAR ROAD

City

WINDSOR

State

SC

Zip Code

29856

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.39

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VP

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

446.31

Transaction ID: B0007696000123L11A1

Full Name (Last, First, Middle Initial)

B. JOHN MICHAEL JOYCE, JR.

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

12 / 06 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Transaction ID: B0007538000031L11A1

Full Name (Last, First, Middle Initial)

C. JOHN MICHAEL JOYCE, JR.

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

12 / 23 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Transaction ID: B0007628000031L11A1

SUBTOTAL of Receipts This Page (optional) ▶

35.39

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JERRY LEWIS JUNEAU

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

16.87

Name of Employer
BC/BS OF TENNESSEE

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

216.71

Transaction ID: B0007506000053L11A1

Full Name (Last, First, Middle Initial)

B. JERRY LEWIS JUNEAU

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 3 1 2 0 0 2

Amount of Each Receipt this Period

16.87

Name of Employer
BC/BS OF TENNESSEE

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

216.71

Transaction ID: B000771S000053L11A1

Full Name (Last, First, Middle Initial)

C. FREDERICK P. KARUTZ

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 2 0 0 2

Amount of Each Receipt this Period

20.00

Name of Employer
BC/BS OF ILLINOIS

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Transaction ID: B000757S000049L11A1

SUBTOTAL of Receipts This Page (optional)

53.34

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. CALVIN E. KELLOGG

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

30.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000751S000017L11A1

Full Name (Last, First, Middle Initial)

B. CALVIN E. KELLOGG

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 3 1 2 0 0 2

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000773S000017L11A1

Full Name (Last, First, Middle Initial)

C. BARBARA A. KELLY

Mailing Address

11 STOCKTON COURT

City

State

Zip Code

BLYTHEWOOD

SC

29016

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 2 0 0 2

Amount of Each Receipt this Period

12.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT HR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Transaction ID: B000767S000128L11A1

SUBTOTAL of Receipts This Page (optional)

62.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. BARBARA A. KELLY

Mailing Address

11 STOCKTON COURT

City

State

Zip Code

BLYTHEWOOD

SC

29016

FEC ID number of contributing
federal political committee.

Date of Receipt

M M / D D / Y Y Y Y
12 / 27 / 2002

Amount of Each Receipt this Period

12.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT HR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Transaction ID: B000768S000128L11A1

Full Name (Last, First, Middle Initial)

B. BARBARA A. KELLY

Mailing Address

11 STOCKTON COURT

City

State

Zip Code

BLYTHEWOOD

SC

29016

FEC ID number of contributing
federal political committee.

Date of Receipt

M M / D D / Y Y Y Y
12 / 27 / 2002

Amount of Each Receipt this Period

12.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT HR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Transaction ID: B000768S000128L11A1

Full Name (Last, First, Middle Initial)

C. ANN RAULINS KEOWN

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

M M / D D / Y Y Y Y
12 / 12 / 2002

Amount of Each Receipt this Period

18.50

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

214.50

Transaction ID: B000750S000056L11A1

SUBTOTAL of Receipts This Page (optional)

40.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ANN RAULINS KEOWN

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 3 1 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

16.50

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

214.50

Transaction ID: B0007716000056L11A1

Full Name (Last, First, Middle Initial)

B. GARY KERL

Mailing Address

244 CAESAR BLVD.

City

State

Zip Code

WILLIAMSVILLE

NY

14221

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

12.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

SENIOR VP, CIO

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

316.00

Transaction ID: B000746S000011L11A1

Full Name (Last, First, Middle Initial)

C. GARY KERL

Mailing Address

244 CAESAR BLVD.

City

State

Zip Code

WILLIAMSVILLE

NY

14221

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

12.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

SENIOR VP, CIO

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

316.00

Transaction ID: B000760S000011L11A1

SUBTOTAL of Receipts This Page (optional)

40.50

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. GARY KERL

Mailing Address

244 CAESAR BLVD.

City

State

Zip Code

WILLIAMSVILLE

NY

14221

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

12.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

SENIOR VP, CIO

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

316.00

Transaction ID: B000766S0000011L11A1

Full Name (Last, First, Middle Initial)

B. RONALD F. KING

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

Amount of Each Receipt this Period

17.50

Name of Employer

BC/BS OF OKLAHOMA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Transaction ID: B000763S0000001L11A1

Full Name (Last, First, Middle Initial)

C. THOMAS KINSER

Mailing Address

6903 HAMILTON ISLAND ROAD

City

State

Zip Code

HARRISON

TN

37341

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period

35.00

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

955.00

Transaction ID: B000750S0000059L11A1

SUBTOTAL of Receipts This Page (optional)

64.50

TOTAL This Period (last page this line number only)

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ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

A. Full Name (Last, First, Middle Initial)
THOMAS KINGER
Mailing Address
6303 HAMILTON ISLAND ROAD
City State Zip Code
HARRISON TN 37341
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF TENNESSEE HEALTH INSURER
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 955.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 2

Amount of Each Receipt this Period
35.00

PAYROLL DEDUCTION

Transaction ID: B0007716000058L11A1

B. Full Name (Last, First, Middle Initial)
DOUGLAS E. KITTREDGE
Mailing Address
1310 G STREET, NW
City State Zip Code
WASHINGTON DC 20005
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS ASSOCIATION HEALTH INSURER
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 2

Amount of Each Receipt this Period
14.00

PAYROLL DEDUCTION

Transaction ID: B000753S000033L11A1

C. Full Name (Last, First, Middle Initial)
DOUGLAS E. KITTREDGE
Mailing Address
1310 G STREET, NW
City State Zip Code
WASHINGTON DC 20005
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS ASSOCIATION HEALTH INSURER
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

Amount of Each Receipt this Period
14.00

PAYROLL DEDUCTION

Transaction ID: B000762S000033L11A1

SUBTOTAL of Receipts This Page (optional) ▶

63.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ROGER W. KLEPPE

Mailing Address

2901 MEAD CT.

City

BURNSVILLE

State

MN

Zip Code

55337

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

14.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

592.00

Transaction ID: B0007416000006L11A1

Full Name (Last, First, Middle Initial)

B. ROGER W. KLEPPE

Mailing Address

2901 MEAD CT.

City

BURNSVILLE

State

MN

Zip Code

55337

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

14.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

592.00

Transaction ID: B0007426000006L11A1

Full Name (Last, First, Middle Initial)

C. ROGER W. KLEPPE

Mailing Address

2901 MEAD CT.

City

BURNSVILLE

State

MN

Zip Code

55337

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

14.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

592.00

Transaction ID: B0007436000006L11A1

SUBTOTAL of Receipts This Page (optional)

42.00

TOTAL This Period (last page this line number only)

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ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ROGER W. KLEPPE

Mailing Address

2901 MEAD CT.

City

BURNSVILLE

State

MN

Zip Code

55337

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

14.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

592.00

Transaction ID: B000744S000006L11A1

Full Name (Last, First, Middle Initial)

B. ROGER W. KLEPPE

Mailing Address

2901 MEAD CT.

City

BURNSVILLE

State

MN

Zip Code

55337

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

14.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

592.00

Transaction ID: B000745S000006L11A1

Full Name (Last, First, Middle Initial)

C. ROGER W. KLEPPE

Mailing Address

2901 MEAD CT.

City

BURNSVILLE

State

MN

Zip Code

55337

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

14.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

592.00

Transaction ID: B000747S000006L11A1

SUBTOTAL of Receipts This Page (optional)

42.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

A. Full Name (Last, First, Middle Initial) ROGER W. KLEPPE Mailing Address 2801 MEAD CT. City State Zip Code BURNSVILLE MN 55337 FEC ID number of contributing federal political committee.		Date of Receipt N M / D E / Y Y Y Y 1 2 / 1 2 / 2 0 0 2 Amount of Each Receipt this Period 14.00
Name of Employer BC/BS OF MINNESOTA Occupation HEALTH INSURER PAYROLL DEDUCTION Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 592.00		Transaction ID: B000748S000006L11A1
B. Full Name (Last, First, Middle Initial) ROGER W. KLEPPE Mailing Address 2801 MEAD CT. City State Zip Code BURNSVILLE MN 55337 FEC ID number of contributing federal political committee.		Date of Receipt N M / D E / Y Y Y Y 1 2 / 2 3 / 2 0 0 2 Amount of Each Receipt this Period 14.00
Name of Employer BC/BS OF MINNESOTA Occupation HEALTH INSURER PAYROLL DEDUCTION Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 592.00		Transaction ID: B000748S000006L11A1
C. Full Name (Last, First, Middle Initial) MARK KOCHANOWSKI Mailing Address 1310 G STREET, N.W. City State Zip Code WASHINGTON DC 20001 FEC ID number of contributing federal political committee.		Date of Receipt N M / D E / Y Y Y Y 1 2 / 1 2 / 2 0 0 2 Amount of Each Receipt this Period 10.00
Name of Employer BC/BS OF WESTERN NEW YORK Occupation HEALTH INSURER PAYROLL DEDUCTION Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 300.00		Transaction ID: B000748S000012L11A1

SUBTOTAL of Receipts This Page (optional) ▶ **38.00**
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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MARK KOCHANOWSKI

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Transaction ID: B000760S000012L11A1

Full Name (Last, First, Middle Initial)

B. MARK KOCHANOWSKI

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Transaction ID: B000760S000012L11A1

Full Name (Last, First, Middle Initial)

C. ALLAN M. KORN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 6 / 2 0 0 2

Amount of Each Receipt this Period

45.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

CHIEF MEDICAL DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1010.00

Transaction ID: B000753S000034L11A1

SUBTOTAL of Receipts This Page (optional)

65.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ALLAN M. KORN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

45.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

CHIEF MEDICAL DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1010.00

Transaction ID: B0007626000034L11A1

Full Name (Last, First, Middle Initial)

B. SHIRLEY S. LADY

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 8 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

14.00

Name of Employer

BDVBS ASSOCIATION

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Transaction ID: B0007535000035L11A1

Full Name (Last, First, Middle Initial)

C. SHIRLEY S. LADY

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

14.00

Name of Employer

BDVBS ASSOCIATION

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Transaction ID: B0007626000035L11A1

SUBTOTAL of Receipts This Page (optional)

73.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. STEVEN N. LAPIERRE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 6 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXECUTIVE REPRESENTATIVE

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000753S000037L11A1

Full Name (Last, First, Middle Initial)

B. STEVEN N. LAPIERRE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXECUTIVE REPRESENTATIVE

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000762S000037L11A1

Full Name (Last, First, Middle Initial)

C. ROBERT A. LEAHEY, JR.

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 6 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS BLUE SHIELD ASSOCIATION

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Transaction ID: B000753S000039L11A1

SUBTOTAL of Receipts This Page (optional)

35.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ROBERT A. LEAHEY, JR.

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS BLUE SHIELD ASSOCIATION

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Transaction ID: B0007626000039L11A1

Full Name (Last, First, Middle Initial)

B. MARY N. LEHNARD

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 6 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

115.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR V.P.

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

2990.00

Transaction ID: B0007539000040L11A1

Full Name (Last, First, Middle Initial)

C. MARY N. LEHNARD

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

115.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR V.P.

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

2990.00

Transaction ID: B0007626000040L11A1

SUBTOTAL of Receipts This Page (optional)

245.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

A. Full Name (Last, First, Middle Initial)
JAMES C. LEVAN
Mailing Address
1310 G STREET N.W.
City State Zip Code
WASHINGTON DC 20005
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF TENNESSEE HEALTH INSURER
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 249.60

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period
19.20

PAYROLL DEDUCTION

Transaction ID: B0007506000064L11A1

B. Full Name (Last, First, Middle Initial)
JAMES C. LEVAN
Mailing Address
1310 G STREET N.W.
City State Zip Code
WASHINGTON DC 20005
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF TENNESSEE HEALTH INSURER
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 249.60

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 2

Amount of Each Receipt this Period
19.20

PAYROLL DEDUCTION

Transaction ID: B000771S000084L11A1

C. Full Name (Last, First, Middle Initial)
THOMAS J. LITTLEFIELD
Mailing Address
1220 CROOKED OAK DRIVE
City State Zip Code
PAWLEYS ISLAND SC 29665
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF SOUTH CAROLINA VICE PRESIDENT
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 232.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period
8.00

PAYROLL DEDUCTION

Transaction ID: B000767S000140L11A1

SUBTOTAL of Receipts This Page (optional) ▶ **46.40**
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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. THOMAS J. LITTLEFIELD

Mailing Address

1220 CROOKED OAK DRIVE

City

State

Zip Code

PAWLEYS ISLAND

SC

29585

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

8.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Transaction ID: B000768S000140L11A1

Full Name (Last, First, Middle Initial)

B. THOMAS J. LITTLEFIELD

Mailing Address

1220 CROOKED OAK DRIVE

City

State

Zip Code

PAWLEYS ISLAND

SC

29585

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

8.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Transaction ID: B000768S000140L11A1

Full Name (Last, First, Middle Initial)

C. JANIS L. LYSEN

Mailing Address

2849 42ND AVE. S.

City

State

Zip Code

MINNEAPOLIS

MN

55406

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 12 / 2002

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B000741S000007L11A1

SUBTOTAL of Receipts This Page (optional)

26.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JANIS L. LYSEN

Mailing Address

2849 42ND AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55406

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007426000007L11A1

Full Name (Last, First, Middle Initial)

B. JANIS L. LYSEN

Mailing Address

2849 42ND AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55406

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007438000007L11A1

Full Name (Last, First, Middle Initial)

C. JANIS L. LYSEN

Mailing Address

2849 42ND AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55406

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007448000007L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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or each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JANIS L. LYSEN

Mailing Address

2849 42ND AVE. S.

City

State

Zip Code

MINNEAPOLIS

MN

55406

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007456000007L11A1

Full Name (Last, First, Middle Initial)

B. JANIS L. LYSEN

Mailing Address

2849 42ND AVE. S.

City

State

Zip Code

MINNEAPOLIS

MN

55406

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007475000007L11A1

Full Name (Last, First, Middle Initial)

C. JANIS L. LYSEN

Mailing Address

2849 42ND AVE. S.

City

State

Zip Code

MINNEAPOLIS

MN

55406

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007485000007L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JANIS L. LYSEN

Mailing Address

2849 42ND AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55406

Date of Receipt

12 / 23 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B000764S000007L11A1

Full Name (Last, First, Middle Initial)

B. MARK MACDOUGAL

Mailing Address

287 WATEREE RIVER ROAD

City

SURFSIDE BEACH

State

SC

Zip Code

29575

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Transaction ID: B000767S000144L11A1

Full Name (Last, First, Middle Initial)

C. MARK MACDOUGAL

Mailing Address

287 WATEREE RIVER ROAD

City

SURFSIDE BEACH

State

SC

Zip Code

29575

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Transaction ID: B000768S000144L11A1

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

A. MARK MACDOUGAL Full Name (Last, First, Middle Initial) Mailing Address 287 WATEREE RIVER ROAD City State Zip Code SURFSIDE BEACH SC 29575 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF SOUTH CAROLINA DIRECTOR Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 580.00		Date of Receipt N M / D E / Y Y Y Y 1 2 / 2 7 / 2 0 0 2 Amount of Each Receipt this Period 20.00 PAYROLL DEDUCTION Transaction ID: B000769S000144L11A1
B. DEBORAH BURNMADSEN Full Name (Last, First, Middle Initial) Mailing Address 1124 ORCHARD PLACE City State Zip Code MENDOTA HEIGHTS MN 55118 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF MINNESOTA HEALTH INSURER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 420.00		Date of Receipt N M / D E / Y Y Y Y 1 2 / 1 2 / 2 0 0 2 Amount of Each Receipt this Period 15.00 PAYROLL DEDUCTION Transaction ID: B000741S000008L11A1
C. DEBORAH BURNMADSEN Full Name (Last, First, Middle Initial) Mailing Address 1124 ORCHARD PLACE City State Zip Code MENDOTA HEIGHTS MN 55118 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF MINNESOTA HEALTH INSURER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 420.00		Date of Receipt N M / D E / Y Y Y Y 1 2 / 1 2 / 2 0 0 2 Amount of Each Receipt this Period 15.00 PAYROLL DEDUCTION Transaction ID: B000742S000008L11A1

SUBTOTAL of Receipts This Page (optional) ▶ **50.00**
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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH BURNMADSEN

Mailing Address

1124 ORCHARD PLACE

City

State

Zip Code

MENDOTA HEIGHTS

MN

55118

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Transaction ID: B000743S000008L11A1

Full Name (Last, First, Middle Initial)

B. DEBORAH BURNMADSEN

Mailing Address

1124 ORCHARD PLACE

City

State

Zip Code

MENDOTA HEIGHTS

MN

55118

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Transaction ID: B000744S000008L11A1

Full Name (Last, First, Middle Initial)

C. DEBORAH BURNMADSEN

Mailing Address

1124 ORCHARD PLACE

City

State

Zip Code

MENDOTA HEIGHTS

MN

55118

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Transaction ID: B000745S000008L11A1

SUBTOTAL of Receipts This Page (optional) ▶

45.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH BURNMADSEN

Mailing Address

1124 ORCHARD PLACE

City

State

Zip Code

MENDOTA HEIGHTS

MN

55118

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Transaction ID: B0007476000008L11A1

Full Name (Last, First, Middle Initial)

B. DEBORAH BURNMADSEN

Mailing Address

1124 ORCHARD PLACE

City

State

Zip Code

MENDOTA HEIGHTS

MN

55118

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Transaction ID: B0007485000008L11A1

Full Name (Last, First, Middle Initial)

C. DEBORAH BURNMADSEN

Mailing Address

1124 ORCHARD PLACE

City

State

Zip Code

MENDOTA HEIGHTS

MN

55118

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 2 0 0 2

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Transaction ID: B0007645000008L11A1

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MARY P. MAZZOLA

Mailing Address

849 BURWELL LANE

City

COLUMBIA

State

SC

Zip Code

29205

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000767S000151L11A1

Full Name (Last, First, Middle Initial)

B. MARY P. MAZZOLA

Mailing Address

849 BURWELL LANE

City

COLUMBIA

State

SC

Zip Code

29205

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000768S000151L11A1

Full Name (Last, First, Middle Initial)

C. MARY P. MAZZOLA

Mailing Address

849 BURWELL LANE

City

COLUMBIA

State

SC

Zip Code

29205

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000769S000151L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. RAYMOND F. MCCASKEY

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

50.00

Name of Employer
BC/BS OF ILLINOIS

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Transaction ID: B0007576000051L11A1

Full Name (Last, First, Middle Initial)

B. NORA MCGUIRE

Mailing Address

235 WILLOW GROVE CT., SOUTH

City

State

Zip Code

TONAWANDA

NY

14150

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF WESTERN NEW YORK

Occupation
SVP, BUS. DEVEL. & MKTG.

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Transaction ID: B0007468000013L11A1

Full Name (Last, First, Middle Initial)

C. NORA MCGUIRE

Mailing Address

235 WILLOW GROVE CT., SOUTH

City

State

Zip Code

TONAWANDA

NY

14150

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF WESTERN NEW YORK

Occupation
SVP, BUS. DEVEL. & MKTG.

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Transaction ID: B0007608000013L11A1

SUBTOTAL of Receipts This Page (optional)

70.00

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)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. NORA MCGUIRE

Mailing Address

235 WILLOW GROVE CT., SOUTH

City

State

Zip Code

TONAWANDA

NY

14150

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

SVP, BUS. DEVEL. & MKTG.

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Transaction ID: B000766S000013L11A1

Full Name (Last, First, Middle Initial)

B. DUNCAN S. MCINTOSH

Mailing Address

2859 GERVAIS STREET

City

State

Zip Code

COLUMBIA

SC

29204

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

SR DEPUTY GEN COUNSEL

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000767S000157L11A1

Full Name (Last, First, Middle Initial)

C. DUNCAN S. MCINTOSH

Mailing Address

2859 GERVAIS STREET

City

State

Zip Code

COLUMBIA

SC

29204

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

SR DEPUTY GEN COUNSEL

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000768S000157L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DUNCAN S. MCINTOSH

Mailing Address

2859 GERVAIS STREET

City

COLUMBIA

State

SC

Zip Code

29204

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation

SR DEPUTY GEN COUNSEL

PAYROLL DEDUCTION

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B0007696000157L11A1

Full Name (Last, First, Middle Initial)

B. WILLIAM MEYER

Mailing Address

2737 CYPRESS BEND ROAD

City

FLORENCE

State

SC

Zip Code

29506

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

58.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation

SR VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

1662.00

Transaction ID: B0007675000183L11A1

Full Name (Last, First, Middle Initial)

C. WILLIAM MEYER

Mailing Address

2737 CYPRESS BEND ROAD

City

FLORENCE

State

SC

Zip Code

29506

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

58.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation

SR VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

1662.00

Transaction ID: B0007685000183L11A1

SUBTOTAL of Receipts This Page (optional) ▶

126.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM MEYER

Mailing Address

2737 CYPRESS BEND ROAD

City

State

Zip Code

FLORENCE

SC

29506

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

58.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

SR VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1882.00

Transaction ID: B0007696000163L11A1

Full Name (Last, First, Middle Initial)

B. ROBERT J. MILIS

Mailing Address

7915 LOWER 139 CT. W.

City

State

Zip Code

APPLE VALLEY

MN

55124

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 12 / 2002

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007418000010L11A1

Full Name (Last, First, Middle Initial)

C. ROBERT J. MILIS

Mailing Address

7915 LOWER 139 CT. W.

City

State

Zip Code

APPLE VALLEY

MN

55124

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 12 / 2002

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007428000010L11A1

SUBTOTAL of Receipts This Page (optional)

78.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

A. Full Name (Last, First, Middle Initial) ROBERT J. MILIS Mailing Address 7915 LOWER 139 CT. W. City State Zip Code APPLE VALLEY MN 55124 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF MINNESOTA HEALTH INSURER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 280.00	Date of Receipt N M / D E / Y Y Y Y 1 2 1 2 2 0 0 2 Amount of Each Receipt this Period 10.00 PAYROLL DEDUCTION Transaction ID: B000743S000010L11A1
B. Full Name (Last, First, Middle Initial) ROBERT J. MILIS Mailing Address 7915 LOWER 139 CT. W. City State Zip Code APPLE VALLEY MN 55124 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF MINNESOTA HEALTH INSURER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 280.00	Date of Receipt N M / D E / Y Y Y Y 1 2 1 2 2 0 0 2 Amount of Each Receipt this Period 10.00 PAYROLL DEDUCTION Transaction ID: B000744S000010L11A1
C. Full Name (Last, First, Middle Initial) ROBERT J. MILIS Mailing Address 7915 LOWER 139 CT. W. City State Zip Code APPLE VALLEY MN 55124 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF MINNESOTA HEALTH INSURER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 280.00	Date of Receipt N M / D E / Y Y Y Y 1 2 1 2 2 0 0 2 Amount of Each Receipt this Period 10.00 PAYROLL DEDUCTION Transaction ID: B000745S000010L11A1

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ROBERT J. MILIS

Mailing Address

7915 LOWER 139 CT. W.

City

APPLE VALLEY

State

MN

Zip Code

55124

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B000747S000010L11A1

Full Name (Last, First, Middle Initial)

B. ROBERT J. MILIS

Mailing Address

7915 LOWER 139 CT. W.

City

APPLE VALLEY

State

MN

Zip Code

55124

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B000748S000010L11A1

Full Name (Last, First, Middle Initial)

C. ROBERT J. MILIS

Mailing Address

7915 LOWER 139 CT. W.

City

APPLE VALLEY

State

MN

Zip Code

55124

Date of Receipt

12 / 23 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B000764S000010L11A1

SUBTOTAL of Receipts This Page (optional) ▶

30.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DAVID J. MILLER

Mailing Address

1650 CELIA RD.

City

State

Zip Code

MENDOTA HEIGHTS

MN

55118

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Transaction ID: B000741S000011L11A1

Full Name (Last, First, Middle Initial)

B. KATHLEEN ANN MOCK

Mailing Address

3766 WESCOTT HILLS D

City

State

Zip Code

EAGAN

MN

55123

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B000741S000012L11A1

Full Name (Last, First, Middle Initial)

C. KATHLEEN ANN MOCK

Mailing Address

3766 WESCOTT HILLS D

City

State

Zip Code

EAGAN

MN

55123

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B000742S000012L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. KATHLEEN ANN MOCK

Mailing Address

3766 WESCOTT HILLS D

City

EAGAN

State

MN

Zip Code

55123

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007436000011L11A1

Full Name (Last, First, Middle Initial)

B. KATHLEEN ANN MOCK

Mailing Address

3766 WESCOTT HILLS D

City

EAGAN

State

MN

Zip Code

55123

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007445000011L11A1

Full Name (Last, First, Middle Initial)

C. KATHLEEN ANN MOCK

Mailing Address

3766 WESCOTT HILLS D

City

EAGAN

State

MN

Zip Code

55123

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007459000011L11A1

SUBTOTAL of Receipts This Page (optional) ▶

30.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. KATHLEEN ANN MOCK

Mailing Address

3766 WESCOTT HILLS D

City

EAGAN

State

MN

Zip Code

55123

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007476000011L11A1

Full Name (Last, First, Middle Initial)

B. KATHLEEN ANN MOCK

Mailing Address

3766 WESCOTT HILLS D

City

EAGAN

State

MN

Zip Code

55123

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007486000011L11A1

Full Name (Last, First, Middle Initial)

C. KATHLEEN ANN MOCK

Mailing Address

3766 WESCOTT HILLS D

City

EAGAN

State

MN

Zip Code

55123

Date of Receipt

12 / 23 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007646000011L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. PATRICIA E. MONAHAN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 06 / 2002

Amount of Each Receipt this Period

14.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Transaction ID: B0007536000042L11A1

Full Name (Last, First, Middle Initial)

B. PATRICIA E. MONAHAN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 23 / 2002

Amount of Each Receipt this Period

14.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Transaction ID: B0007628000042L11A1

Full Name (Last, First, Middle Initial)

C. MICHAEL J. MORROW

Mailing Address

3744 HUNTINGTON AV. S.

City

State

Zip Code

ST. LOUIS PARK

MN

55416

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 12 / 2002

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007418000013L11A1

SUBTOTAL of Receipts This Page (optional) ▶

38.00

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)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

A. Full Name (Last, First, Middle Initial) MICHAEL J. MORROW Mailing Address 3744 HUNTINGTON AV. S. City State Zip Code ST. LOUIS PARK MN 55416 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF MINNESOTA HEALTH INSURER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 280.00		Date of Receipt N M / D E / Y Y Y Y 1 2 1 2 2 0 0 2 Amount of Each Receipt this Period 10.00 PAYROLL DEDUCTION Transaction ID: B0007426000013L11A1
B. Full Name (Last, First, Middle Initial) MICHAEL J. MORROW Mailing Address 3744 HUNTINGTON AV. S. City State Zip Code ST. LOUIS PARK MN 55416 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF MINNESOTA HEALTH INSURER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 280.00		Date of Receipt N M / D E / Y Y Y Y 1 2 1 2 2 0 0 2 Amount of Each Receipt this Period 10.00 PAYROLL DEDUCTION Transaction ID: B0007438000012L11A1
C. Full Name (Last, First, Middle Initial) MICHAEL J. MORROW Mailing Address 3744 HUNTINGTON AV. S. City State Zip Code ST. LOUIS PARK MN 55416 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF MINNESOTA HEALTH INSURER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 280.00		Date of Receipt N M / D E / Y Y Y Y 1 2 1 2 2 0 0 2 Amount of Each Receipt this Period 10.00 PAYROLL DEDUCTION Transaction ID: B0007448000012L11A1

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**
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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

A. MICHAEL J. MORROW Full Name (Last, First, Middle Initial) Mailing Address 3744 HUNTINGTON AV. S. City State Zip Code ST. LOUIS PARK MN 55416 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF MINNESOTA HEALTH INSURER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 280.00		Date of Receipt N M / D E / Y Y Y Y 1 2 / 1 2 2 0 0 2 Amount of Each Receipt this Period 10.00 PAYROLL DEDUCTION Transaction ID: B0007456000012L11A1
B. MICHAEL J. MORROW Full Name (Last, First, Middle Initial) Mailing Address 3744 HUNTINGTON AV. S. City State Zip Code ST. LOUIS PARK MN 55416 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF MINNESOTA HEALTH INSURER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 280.00		Date of Receipt N M / D E / Y Y Y Y 1 2 / 1 2 2 0 0 2 Amount of Each Receipt this Period 10.00 PAYROLL DEDUCTION Transaction ID: B0007475000012L11A1
C. MICHAEL J. MORROW Full Name (Last, First, Middle Initial) Mailing Address 3744 HUNTINGTON AV. S. City State Zip Code ST. LOUIS PARK MN 55416 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF MINNESOTA HEALTH INSURER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 280.00		Date of Receipt N M / D E / Y Y Y Y 1 2 / 1 2 2 0 0 2 Amount of Each Receipt this Period 10.00 PAYROLL DEDUCTION Transaction ID: B0007485000012L11A1

SUBTOTAL of Receipts This Page (optional) ▶ **30.00**
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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or each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL J. MORROW

Mailing Address

3744 HUNTINGTON AV. S.

City

State

Zip Code

ST. LOUIS PARK

MN

55416

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B000764S000012L11A1

Full Name (Last, First, Middle Initial)

B. HELEN B. MURRAY

Mailing Address

392 STONERIDGE COURT

City

State

Zip Code

BLYTHEWOOD

SC

29016

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

50.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Transaction ID: B000767S000171L11A1

Full Name (Last, First, Middle Initial)

C. HELEN B. MURRAY

Mailing Address

392 STONERIDGE COURT

City

State

Zip Code

BLYTHEWOOD

SC

29016

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

50.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Transaction ID: B000768S000171L11A1

SUBTOTAL of Receipts This Page (optional)

110.00

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)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. HELEN B. MURRAY

Mailing Address

382 STONERIDGE COURT

City

State

Zip Code

BLYTHEWOOD

SC

29016

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

50.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Transaction ID: B0007696000171L11A1

Full Name (Last, First, Middle Initial)

B. NANCY F. NELSON

Mailing Address

1781 TAMBERWOOD TR.

City

State

Zip Code

WOODBURY

MN

55125

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 12 / 2002

Amount of Each Receipt this Period

18.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Transaction ID: B0007418000014L11A1

Full Name (Last, First, Middle Initial)

C. NANCY F. NELSON

Mailing Address

1781 TAMBERWOOD TR.

City

State

Zip Code

WOODBURY

MN

55125

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 12 / 2002

Amount of Each Receipt this Period

18.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Transaction ID: B0007428000014L11A1

SUBTOTAL of Receipts This Page (optional) ▶

86.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. NANCY F. NELSON

Mailing Address

1781 TAMBERWOOD TR.

City

WOODBURY

State

MN

Zip Code

55125

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

18.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Transaction ID: B000743S000013L11A1

Full Name (Last, First, Middle Initial)

B. NANCY F. NELSON

Mailing Address

1781 TAMBERWOOD TR.

City

WOODBURY

State

MN

Zip Code

55125

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

18.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Transaction ID: B000744S000013L11A1

Full Name (Last, First, Middle Initial)

C. NANCY F. NELSON

Mailing Address

1781 TAMBERWOOD TR.

City

WOODBURY

State

MN

Zip Code

55125

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

18.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Transaction ID: B000745S000013L11A1

SUBTOTAL of Receipts This Page (optional)

54.00

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)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. NANCY F. NELSON

Mailing Address

1781 TAMBERWOOD TR.

City

WOODBURY

State

MN

Zip Code

55125

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

18.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Transaction ID: B0007476000013L11A1

Full Name (Last, First, Middle Initial)

B. NANCY F. NELSON

Mailing Address

1781 TAMBERWOOD TR.

City

WOODBURY

State

MN

Zip Code

55125

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

18.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Transaction ID: B0007486000013L11A1

Full Name (Last, First, Middle Initial)

C. NANCY F. NELSON

Mailing Address

1781 TAMBERWOOD TR.

City

WOODBURY

State

MN

Zip Code

55125

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

18.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Transaction ID: B0007646000013L11A1

SUBTOTAL of Receipts This Page (optional)

54.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. RICHARD P. NEUNER

Mailing Address

5005 NEWTON AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55419

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007416000015L11A1

Full Name (Last, First, Middle Initial)

B. RICHARD P. NEUNER

Mailing Address

5005 NEWTON AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55419

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007426000015L11A1

Full Name (Last, First, Middle Initial)

C. RICHARD P. NEUNER

Mailing Address

5005 NEWTON AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55419

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007436000014L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. RICHARD P. NEUNER

Mailing Address

5005 NEWTON AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55419

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B000744S000014L11A1

Full Name (Last, First, Middle Initial)

B. RICHARD P. NEUNER

Mailing Address

5005 NEWTON AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55419

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B000745S000014L11A1

Full Name (Last, First, Middle Initial)

C. RICHARD P. NEUNER

Mailing Address

5005 NEWTON AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55419

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B000747S000014L11A1

SUBTOTAL of Receipts This Page (optional) ▶

30.00

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)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

A. Full Name (Last, First, Middle Initial) RICHARD P. NEUNER		Date of Receipt N M / D E / Y Y Y Y 1 2 / 1 2 / 2 0 0 2	
Mailing Address 5005 NEWTON AVE. S.			
City	State	Zip Code	
MINNEAPOLIS	MN	55419	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 10.00	
Name of Employer BC/BS OF MINNESOTA		Occupation HEALTH INSURER	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00	
		Transaction ID: B0007486000014L11A1	
B. Full Name (Last, First, Middle Initial) RICHARD P. NEUNER		Date of Receipt N M / D E / Y Y Y Y 1 2 / 2 3 / 2 0 0 2	
Mailing Address 5005 NEWTON AVE. S.			
City	State	Zip Code	
MINNEAPOLIS	MN	55419	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 10.00	
Name of Employer BC/BS OF MINNESOTA		Occupation HEALTH INSURER	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00	
		Transaction ID: B0007645000014L11A1	
C. Full Name (Last, First, Middle Initial) RICHARD M. NIEMIED		Date of Receipt N M / D E / Y Y Y Y 1 2 / 1 2 / 2 0 0 2	
Mailing Address 4239 HARRIET AVE.			
City	State	Zip Code	
MINNEAPOLIS	MN	55409	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 50.00	
Name of Employer BC/BS OF MINNESOTA		Occupation HEALTH INSURER	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 1900.00	
		Transaction ID: B0007415000016L11A1	

SUBTOTAL of Receipts This Page (optional) ▶ **70.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)
A. RICHARD M. NIEMIEC
Mailing Address
4239 HARRIET AVE.
City State Zip Code
MINNEAPOLIS MN 55409
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF MINNESOTA HEALTH INSURER
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 1900.00

Date of Receipt
N M / D E / Y Y Y Y
1 2 1 2 2 0 0 2

Amount of Each Receipt this Period
50.00

PAYROLL DEDUCTION

Transaction ID: B0007426000016L11A1

Full Name (Last, First, Middle Initial)
B. RICHARD M. NIEMIEC
Mailing Address
4239 HARRIET AVE.
City State Zip Code
MINNEAPOLIS MN 55409
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF MINNESOTA HEALTH INSURER
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 1900.00

Date of Receipt
N M / D E / Y Y Y Y
1 2 1 2 2 0 0 2

Amount of Each Receipt this Period
50.00

PAYROLL DEDUCTION

Transaction ID: B0007439000015L11A1

Full Name (Last, First, Middle Initial)
C. RICHARD M. NIEMIEC
Mailing Address
4239 HARRIET AVE.
City State Zip Code
MINNEAPOLIS MN 55409
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF MINNESOTA HEALTH INSURER
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 1900.00

Date of Receipt
N M / D E / Y Y Y Y
1 2 1 2 2 0 0 2

Amount of Each Receipt this Period
50.00

PAYROLL DEDUCTION

Transaction ID: B0007449000015L11A1

SUBTOTAL of Receipts This Page (optional) ▶

150.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. RICHARD M. NIEMIEC

Mailing Address

4239 HARRIET AVE.

City

MINNEAPOLIS

State

MN

Zip Code

55409

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

50.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Transaction ID: B0007456000015L11A1

Full Name (Last, First, Middle Initial)

B. RICHARD M. NIEMIEC

Mailing Address

4239 HARRIET AVE.

City

MINNEAPOLIS

State

MN

Zip Code

55409

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

50.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Transaction ID: B0007475000015L11A1

Full Name (Last, First, Middle Initial)

C. RICHARD M. NIEMIEC

Mailing Address

4239 HARRIET AVE.

City

MINNEAPOLIS

State

MN

Zip Code

55409

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

50.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Transaction ID: B0007485000015L11A1

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. RICHARD M. NIEMIEC

Mailing Address

4239 HARRIET AVE.

City

MINNEAPOLIS

State

MN

Zip Code

55409

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 23 / 2002

Amount of Each Receipt this Period

50.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Transaction ID: B000764S000015L11A1

Full Name (Last, First, Middle Initial)

B. CHAD NILES

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 23 / 2002

Amount of Each Receipt this Period

5.00

Name of Employer
NORIDIAN-BC/BS OF NORTH DAKOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Transaction ID: B000758S000024L11A1

Full Name (Last, First, Middle Initial)

C. JOHN N. DUNJIAN

Mailing Address

1314 MARQUETTE AVE.

#3105

City

MINNEAPOLIS

State

MN

Zip Code

55403

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 12 / 2002

Amount of Each Receipt this Period

20.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Transaction ID: B000741S000017L11A1

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOHN N. DUNJIAN

Mailing Address

1314 MARQUETTE AVE.

#3105

City

State

Zip Code

MINEAPOLIS

MN

55403

FEC ID number of contributing
federal political committee.

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period

20.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Transaction ID: B0007426000017L11A1

Full Name (Last, First, Middle Initial)

B. JOHN N. DUNJIAN

Mailing Address

1314 MARQUETTE AVE.

#3105

City

State

Zip Code

MINEAPOLIS

MN

55403

FEC ID number of contributing
federal political committee.

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period

20.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Transaction ID: B0007439000016L11A1

Full Name (Last, First, Middle Initial)

C. JOHN N. DUNJIAN

Mailing Address

1314 MARQUETTE AVE.

#3105

City

State

Zip Code

MINEAPOLIS

MN

55403

FEC ID number of contributing
federal political committee.

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period

20.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Transaction ID: B0007449000016L11A1

SUBTOTAL of Receipts This Page (optional)

60.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOHN N. DUNJIAN

Mailing Address

1314 MARQUETTE AVE.

#3105

City

State

Zip Code

MINEAPOLIS

MN

55403

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 12 / 2002

Amount of Each Receipt this Period

20.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Transaction ID: B0007456000016L11A1

Full Name (Last, First, Middle Initial)

B. JOHN N. DUNJIAN

Mailing Address

1314 MARQUETTE AVE.

#3105

City

State

Zip Code

MINEAPOLIS

MN

55403

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 12 / 2002

Amount of Each Receipt this Period

20.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Transaction ID: B0007475000016L11A1

Full Name (Last, First, Middle Initial)

C. JOHN N. DUNJIAN

Mailing Address

1314 MARQUETTE AVE.

#3105

City

State

Zip Code

MINEAPOLIS

MN

55403

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 12 / 2002

Amount of Each Receipt this Period

20.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Transaction ID: B0007485000016L11A1

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOHN N. DUNJIAN

Mailing Address

1314 MARQUETTE AVE.

#31 D5

City

State

Zip Code

MINNEAPOLIS

MN

55403

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 23 / 2002

Amount of Each Receipt this Period

20.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Transaction ID: B000764S000016L11A1

Full Name (Last, First, Middle Initial)

B. CHARLES PACE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 18 / 2002

Amount of Each Receipt this Period

20.00

Name of Employer
BC/BS OF MISSISSIPPI

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Transaction ID: B000754S000005L11A1

Full Name (Last, First, Middle Initial)

C. DAVID S. PANKAU

Mailing Address

145 ALEXANDER CIRCLE

City

State

Zip Code

COLUMBIA

SC

29206

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation
SR VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000767S000181L11A1

SUBTOTAL of Receipts This Page (optional)

50.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DAVID S. PANKAU

Mailing Address

145 ALEXANDER CIRCLE

City

COLUMBIA

State

SC

Zip Code

29206

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

SR VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000768S000181L11A1

Full Name (Last, First, Middle Initial)

B. DAVID S. PANKAU

Mailing Address

145 ALEXANDER CIRCLE

City

COLUMBIA

State

SC

Zip Code

29206

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

SR VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000768S000181L11A1

Full Name (Last, First, Middle Initial)

C. TERRY A. PEACE

Mailing Address

460 OLD FERRY ROAD

City

CHAPIN

State

SC

Zip Code

29036

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

21.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

SR DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

369.00

Transaction ID: B000767S000183L11A1

SUBTOTAL of Receipts This Page (optional)

41.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. TERRY A. PEACE

Mailing Address

480 OLD FERRY ROAD

City

CHAPIN

State

SC

Zip Code

29036

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

21.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation
SR DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

389.00

Transaction ID: B000768S000183L11A1

Full Name (Last, First, Middle Initial)

B. TERRY A. PEACE

Mailing Address

480 OLD FERRY ROAD

City

CHAPIN

State

SC

Zip Code

29036

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

21.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation
SR DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

389.00

Transaction ID: B000768S000183L11A1

Full Name (Last, First, Middle Initial)

C. BRITTIE S. PEARCY

Mailing Address

43 POLO RIDGE CIRCLE

City

COLUMBIA

State

SC

Zip Code

29223

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation
VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Transaction ID: B000767S000184L11A1

SUBTOTAL of Receipts This Page (optional)

62.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. BRITTIE S. PEARCY

Mailing Address

43 POLO RIDGE CIRCLE

City

COLUMBIA

State

SC

Zip Code

29223

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Transaction ID: B000768S000184L11A1

Full Name (Last, First, Middle Initial)

B. BRITTIE S. PEARCY

Mailing Address

43 POLO RIDGE CIRCLE

City

COLUMBIA

State

SC

Zip Code

29223

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Transaction ID: B000768S000184L11A1

Full Name (Last, First, Middle Initial)

C. VERDELL PEE

Mailing Address

315 CREEK DRIVE

City

QUINBY

State

SC

Zip Code

29506

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

8.33

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

241.57

Transaction ID: B000767S000185L11A1

SUBTOTAL of Receipts This Page (optional)

48.33

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. VERDELL PEE

Mailing Address

315 CREEK DRIVE

City

State

Zip Code

QUINBY

SC

29506

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

8.33

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

241.57

Transaction ID: B000768S000185L11A1

Full Name (Last, First, Middle Initial)

B. VERDELL PEE

Mailing Address

315 CREEK DRIVE

City

State

Zip Code

QUINBY

SC

29506

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

8.33

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

241.57

Transaction ID: B000768S000185L11A1

Full Name (Last, First, Middle Initial)

C. E.S. PENDLETON

Mailing Address

570 CHAPMAN LOOP

City

State

Zip Code

PAWLEYS ISLAND

SC

29565

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

9.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Transaction ID: B000767S000186L11A1

SUBTOTAL of Receipts This Page (optional)

25.66

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. E.S. PENDLETON

Mailing Address

570 CHAPMAN LOOP

City

State

Zip Code

PAWLEYS ISLAND

SC

29585

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

9.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Transaction ID: B000768S000186L11A1

Full Name (Last, First, Middle Initial)

B. E.S. PENDLETON

Mailing Address

570 CHAPMAN LOOP

City

State

Zip Code

PAWLEYS ISLAND

SC

29585

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

9.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Transaction ID: B000768S000186L11A1

Full Name (Last, First, Middle Initial)

C. TIMOTHY PETERSON

Mailing Address

19865 ANDOVER PLACE

City

State

Zip Code

DEEPHAVEN

MN

55331

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 12 / 2002

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Transaction ID: B000741S000018L11A1

SUBTOTAL of Receipts This Page (optional)

28.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. TIMOTHY PETERSON

Mailing Address

19865 ANDOVER PLACE

City

DEEPHAVEN

State

MN

Zip Code

55331

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Transaction ID: B0007426000018L11A1

Full Name (Last, First, Middle Initial)

B. TIMOTHY PETERSON

Mailing Address

19865 ANDOVER PLACE

City

DEEPHAVEN

State

MN

Zip Code

55331

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Transaction ID: B0007439000017L11A1

Full Name (Last, First, Middle Initial)

C. TIMOTHY PETERSON

Mailing Address

19865 ANDOVER PLACE

City

DEEPHAVEN

State

MN

Zip Code

55331

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Transaction ID: B0007449000017L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. TIMOTHY PETERSON

Mailing Address

19865 ANDOVER PLACE

City

DEEPHAVEN

State

MN

Zip Code

55331

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Transaction ID: B0007456000017L11A1

Full Name (Last, First, Middle Initial)

B. TIMOTHY PETERSON

Mailing Address

19865 ANDOVER PLACE

City

DEEPHAVEN

State

MN

Zip Code

55331

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Transaction ID: B0007475000017L11A1

Full Name (Last, First, Middle Initial)

C. TIMOTHY PETERSON

Mailing Address

19865 ANDOVER PLACE

City

DEEPHAVEN

State

MN

Zip Code

55331

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Transaction ID: B0007485000017L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. TIMOTHY PETERSON

Mailing Address

18885 ANDOVER PLACE

City

DEEPHAVEN

State

MN

Zip Code

55331

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Transaction ID: B000764S000017L11A1

Full Name (Last, First, Middle Initial)

B. TROY B. POPE

Mailing Address

504 LONGTOWN ROAD WEST

City

BLYTHEWOOD

State

SC

Zip Code

29016

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

9.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation
ASST VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Transaction ID: B000767S000192L11A1

Full Name (Last, First, Middle Initial)

C. TROY B. POPE

Mailing Address

504 LONGTOWN ROAD WEST

City

BLYTHEWOOD

State

SC

Zip Code

29016

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

9.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation
ASST VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Transaction ID: B000768S000192L11A1

SUBTOTAL of Receipts This Page (optional) ▶

28.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. TROY B. POPE

Mailing Address

504 LONGTOWN ROAD WEST

City

State

Zip Code

BLYTHEWOOD

SC

29016

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

9.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

ASST VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Transaction ID: B0007696000192L11A1

Full Name (Last, First, Middle Initial)

B. JOHN H. PROCTOR, III

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 18 / 2002

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF MISSISSIPPI

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Transaction ID: B0007549000006L11A1

Full Name (Last, First, Middle Initial)

C. SANDRA J. QUINLIVAN

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 23 / 2002

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ILLINOIS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Transaction ID: B0007579000054L11A1

SUBTOTAL of Receipts This Page (optional) ▶

49.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. KAREN C. RALEY

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

30.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000751S000022L11A1

Full Name (Last, First, Middle Initial)

B. KAREN C. RALEY

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 3 1 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000773S000022L11A1

Full Name (Last, First, Middle Initial)

C. COLLEEN FOLE REITAN

Mailing Address

295 MACALESTER ST.

City

State

Zip Code

ST. PAUL

MN

55105

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Transaction ID: B000741S000019L11A1

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. COLLEEN FOLE REITAN

Mailing Address

295 MACALESTER ST.

City

ST. PAUL

State

MN

Zip Code

55105

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Transaction ID: B0007426000019L11A1

Full Name (Last, First, Middle Initial)

B. COLLEEN FOLE REITAN

Mailing Address

295 MACALESTER ST.

City

ST. PAUL

State

MN

Zip Code

55105

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Transaction ID: B000743S000018L11A1

Full Name (Last, First, Middle Initial)

C. COLLEEN FOLE REITAN

Mailing Address

295 MACALESTER ST.

City

ST. PAUL

State

MN

Zip Code

55105

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Transaction ID: B000744S000018L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. COLLEEN FOLE REITAN

Mailing Address

295 MACALESTER ST.

City

ST. PAUL

State

MN

Zip Code

55105

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Transaction ID: B0007456000018L11A1

Full Name (Last, First, Middle Initial)

B. COLLEEN FOLE REITAN

Mailing Address

295 MACALESTER ST.

City

ST. PAUL

State

MN

Zip Code

55105

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Transaction ID: B0007475000018L11A1

Full Name (Last, First, Middle Initial)

C. COLLEEN FOLE REITAN

Mailing Address

295 MACALESTER ST.

City

ST. PAUL

State

MN

Zip Code

55105

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Transaction ID: B0007485000018L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. COLLEEN FOLE REITAN

Mailing Address

295 MACALESTER ST.

City

ST. PAUL

State

MN

Zip Code

55105

Date of Receipt

12 / 23 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Transaction ID: B000764S000018L11A1

Full Name (Last, First, Middle Initial)

B. MIKE H. REITZ

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

12 / 18 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

80.00

Name of Employer

BC/BS OF LOUISIANA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Transaction ID: B000755S000011L11A1

Full Name (Last, First, Middle Initial)

C. JOSEPH D. RHAME

Mailing Address

1256 RUDDY DUCK ROAD

City

CAMDEN

State

SC

Zip Code

29020

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000767S000201L11A1

SUBTOTAL of Receipts This Page (optional) ▶

80.00

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)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

A. Full Name (Last, First, Middle Initial)
JOSEPH D. RHAME
Mailing Address
1256 RUDDY DUCK ROAD
City State Zip Code
CAMDEN SC 29020
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF SOUTH CAROLINA DIRECTOR
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 290.00

Date of Receipt
N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period
10.00

PAYROLL DEDUCTION

Transaction ID: B000768S000201L11A1

B. Full Name (Last, First, Middle Initial)
JOSEPH D. RHAME
Mailing Address
1256 RUDDY DUCK ROAD
City State Zip Code
CAMDEN SC 29020
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF SOUTH CAROLINA DIRECTOR
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 290.00

Date of Receipt
N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period
10.00

PAYROLL DEDUCTION

Transaction ID: B000768S000201L11A1

C. Full Name (Last, First, Middle Initial)
STEVEN W. RICHARDS
Mailing Address
6804 DAKOTA TRAIL
City State Zip Code
EDINA MN 55439
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF MINNESOTA HEALTH INSURER
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 280.00

Date of Receipt
N M / D E / Y Y Y Y
1 2 / 1 2 / 2 0 0 2

Amount of Each Receipt this Period
10.00

PAYROLL DEDUCTION

Transaction ID: B000741S000201L11A1

SUBTOTAL of Receipts This Page (optional) ▶

30.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

A. Full Name (Last, First, Middle Initial) STEVEN W. RICHARDS		Date of Receipt N M / D E / Y Y Y Y 1 2 / 1 2 / 2 0 0 2	
Mailing Address 6804 DAKOTA TRAIL			
City	State	Zip Code	
EDINA	MN	55439	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 10.00	
Name of Employer BC/BS OF MINNESOTA		Occupation HEALTH INSURER	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00	
		Transaction ID: B0007426000020L11A1	
B. Full Name (Last, First, Middle Initial) STEVEN W. RICHARDS		Date of Receipt N M / D E / Y Y Y Y 1 2 / 1 2 / 2 0 0 2	
Mailing Address 6804 DAKOTA TRAIL			
City	State	Zip Code	
EDINA	MN	55439	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 10.00	
Name of Employer BC/BS OF MINNESOTA		Occupation HEALTH INSURER	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00	
		Transaction ID: B000743S0000019L11A1	
C. Full Name (Last, First, Middle Initial) STEVEN W. RICHARDS		Date of Receipt N M / D E / Y Y Y Y 1 2 / 1 2 / 2 0 0 2	
Mailing Address 6804 DAKOTA TRAIL			
City	State	Zip Code	
EDINA	MN	55439	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 10.00	
Name of Employer BC/BS OF MINNESOTA		Occupation HEALTH INSURER	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00	
		Transaction ID: B000744S0000019L11A1	

SUBTOTAL of Receipts This Page (optional) **30.00**

TOTAL This Period (last page this line number only) **30.00**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. STEVEN W. RICHARDS

Mailing Address

6804 DAKOTA TRAIL

City

EDINA

State

MN

Zip Code

55439

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007456000019L11A1

Full Name (Last, First, Middle Initial)

B. STEVEN W. RICHARDS

Mailing Address

6804 DAKOTA TRAIL

City

EDINA

State

MN

Zip Code

55439

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007475000019L11A1

Full Name (Last, First, Middle Initial)

C. STEVEN W. RICHARDS

Mailing Address

6804 DAKOTA TRAIL

City

EDINA

State

MN

Zip Code

55439

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007485000019L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. STEVEN W. RICHARDS

Mailing Address

6804 DAKOTA TRAIL

City

EDINA

State

MN

Zip Code

55439

Date of Receipt

12 / 23 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B000764S000019L11A1

Full Name (Last, First, Middle Initial)

B. ROBERT W. RICHARDSON

Mailing Address

2547 PHEASANT WALK

City

ELGIN

State

SC

Zip Code

29045

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000767S000202L11A1

Full Name (Last, First, Middle Initial)

C. ROBERT W. RICHARDSON

Mailing Address

2547 PHEASANT WALK

City

ELGIN

State

SC

Zip Code

29045

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000768S000202L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ROBERT W. RICHARDSON

Mailing Address

2547 PHEASANT WALK

City

ELGIN

State

SC

Zip Code

29045

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B0007696000202L11A1

Full Name (Last, First, Middle Initial)

B. WAYNE T. ROBERTS

Mailing Address

109 EAST SPRINGS ROAD

City

COLUMBIA

State

SC

Zip Code

29223

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

13.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Transaction ID: B0007678000204L11A1

Full Name (Last, First, Middle Initial)

C. WAYNE T. ROBERTS

Mailing Address

109 EAST SPRINGS ROAD

City

COLUMBIA

State

SC

Zip Code

29223

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

13.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Transaction ID: B0007688000204L11A1

SUBTOTAL of Receipts This Page (optional)

36.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. WAYNE T. ROBERTS

Mailing Address

100 EAST SPRINGS ROAD

City

State

Zip Code

COLUMBIA

SC

29223

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

13.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Transaction ID: B0007696000204L11A1

Full Name (Last, First, Middle Initial)

B. MELVIN R. ROGERS

Mailing Address

9578 INDIGO CLUB DRIVE

City

State

Zip Code

MURRELLSINLET

SC

29576

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

7.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Transaction ID: B0007678000205L11A1

Full Name (Last, First, Middle Initial)

C. MELVIN R. ROGERS

Mailing Address

9578 INDIGO CLUB DRIVE

City

State

Zip Code

MURRELLSINLET

SC

29576

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

7.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Transaction ID: B0007688000205L11A1

SUBTOTAL of Receipts This Page (optional)

27.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MELVIN R. ROGERS

Mailing Address

9578 INDIGO CLUB DRIVE

City

State

Zip Code

MURRELLSINLET

SC

29576

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

7.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Transaction ID: B0007696000205L11A1

Full Name (Last, First, Middle Initial)

B. ROBERT D. ROSECRANS, JR.

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 6 / 2 0 0 2

Amount of Each Receipt this Period

25.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGING DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Transaction ID: B0007538000043L11A1

Full Name (Last, First, Middle Initial)

C. ROBERT D. ROSECRANS, JR.

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

Amount of Each Receipt this Period

25.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGING DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Transaction ID: B0007628000043L11A1

SUBTOTAL of Receipts This Page (optional)

57.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

A. Full Name (Last, First, Middle Initial) WILLIAM F. ROWELL Mailing Address 112 SILVER LAKE ROAD EAST City State Zip Code COLUMBIA SC 29223 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF SOUTH CAROLINA ASST VICE PRESIDENT Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 304.50	Date of Receipt N M / D E / Y Y Y Y 1 2 / 2 7 / 2 0 0 2 Amount of Each Receipt this Period 10.50 PAYROLL DEDUCTION Transaction ID: B000767S000207L11A1
B. Full Name (Last, First, Middle Initial) WILLIAM F. ROWELL Mailing Address 112 SILVER LAKE ROAD EAST City State Zip Code COLUMBIA SC 29223 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF SOUTH CAROLINA ASST VICE PRESIDENT Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 304.50	Date of Receipt N M / D E / Y Y Y Y 1 2 / 2 7 / 2 0 0 2 Amount of Each Receipt this Period 10.50 PAYROLL DEDUCTION Transaction ID: B000768S000207L11A1
C. Full Name (Last, First, Middle Initial) WILLIAM F. ROWELL Mailing Address 112 SILVER LAKE ROAD EAST City State Zip Code COLUMBIA SC 29223 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF SOUTH CAROLINA ASST VICE PRESIDENT Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 304.50	Date of Receipt N M / D E / Y Y Y Y 1 2 / 2 7 / 2 0 0 2 Amount of Each Receipt this Period 10.50 PAYROLL DEDUCTION Transaction ID: B000769S000207L11A1

SUBTOTAL of Receipts This Page (optional) ▶ **31.50**

TOTAL This Period (last page this line number only) ▶

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ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

A. Full Name (Last, First, Middle Initial)
JOSEPH M. RUBANO
Mailing Address
1310 G STREET, NW
City State Zip Code
WASHINGTON DC 20005
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF ILLINOIS HEALTH INSURER
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

Amount of Each Receipt this Period
30.00

PAYROLL DEDUCTION

Transaction ID: B000757S000055L11A1

B. Full Name (Last, First, Middle Initial)
RONALD L. RUSHTON
Mailing Address
106 W BUTLER AVE
City State Zip Code
SALUDA SC 29138
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF SOUTH CAROLINA VICE PRESIDENT
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 580.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period
20.00

PAYROLL DEDUCTION

Transaction ID: B000767S000209L11A1

C. Full Name (Last, First, Middle Initial)
RONALD L. RUSHTON
Mailing Address
106 W BUTLER AVE
City State Zip Code
SALUDA SC 29138
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF SOUTH CAROLINA VICE PRESIDENT
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 580.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period
20.00

PAYROLL DEDUCTION

Transaction ID: B000768S000209L11A1

SUBTOTAL of Receipts This Page (optional) **70.00**

TOTAL This Period (last page this line number only) **70.00**

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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. RONALD L. RUGHTON

Mailing Address

106 W BUTLER AVE

City

SALUDA

State

SC

Zip Code

29138

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Transaction ID: B000769S000209L11A1

Full Name (Last, First, Middle Initial)

B. MARTHA L. RUST

Mailing Address

3812 COUNTY RD. 17S

City

FARGO

State

ND

Zip Code

58104

Date of Receipt

12 / 23 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF NORTH DAKOTA

Occupation

CFO GOVERNMENT SERVICES

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000758S000031L11A1

Full Name (Last, First, Middle Initial)

C. GREGORY EDWARD SAMUELS

Mailing Address

1310 G STREET N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

18.00

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Transaction ID: B000750S000077L11A1

SUBTOTAL of Receipts This Page (optional)

58.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. GREGORY EDWARD SAMUELS

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 3 1 / 2 0 0 2

Amount of Each Receipt this Period

16.00

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Transaction ID: B000771S000077L11A1

Full Name (Last, First, Middle Initial)

B. DANIEL SCHWANDT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

Amount of Each Receipt this Period

20.00

Name of Employer

NORIDIAN-BC/BS OF NORTH DAKOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000758S000032L11A1

Full Name (Last, First, Middle Initial)

C. LYNDA W. SCOTT

Mailing Address

20 JAPONICA PLACE

City

State

Zip Code

PAWLEYS ISLAND

SC

29665

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000767S0000213L11A1

SUBTOTAL of Receipts This Page (optional)

46.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. LYNDAY W. SCOTT

Mailing Address

2D JAPONICA PLACE

City

State

Zip Code

PAWLEYS ISLAND

SC

29585

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000768S000213L11A1

Full Name (Last, First, Middle Initial)

B. LYNDAY W. SCOTT

Mailing Address

2D JAPONICA PLACE

City

State

Zip Code

PAWLEYS ISLAND

SC

29585

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000768S000213L11A1

Full Name (Last, First, Middle Initial)

C. SCOTT P. BEROTA

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 06 / 2002

Amount of Each Receipt this Period

197.30

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

CEO

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Transaction ID: B000753S000047L11A1

SUBTOTAL of Receipts This Page (optional) ▶

217.30

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. SCOTT P. SEROTA

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

Amount of Each Receipt this Period

87.50

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

CEO

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Transaction ID: B0007726000001L11A1

Full Name (Last, First, Middle Initial)

B. KEVIN D. SHANKLIN

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 6 / 2 0 0 2

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS BLUE SHIELD ASSOCIATION

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Transaction ID: B000753S0000048L11A1

Full Name (Last, First, Middle Initial)

C. KEVIN D. SHANKLIN

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS BLUE SHIELD ASSOCIATION

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Transaction ID: B000762S0000048L11A1

SUBTOTAL of Receipts This Page (optional)

97.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ROBERT L. SHOPTAW

Mailing Address

21 RIVER RIDGE CIRCLE

City

State

Zip Code

LITTLE ROCK

AR

72227

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

105.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

CHIEF EXECUTIVE OFFICER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1515.00

Transaction ID: B000751S000025L11A1

Full Name (Last, First, Middle Initial)

B. ROBERT L. SHOPTAW

Mailing Address

21 RIVER RIDGE CIRCLE

City

State

Zip Code

LITTLE ROCK

AR

72227

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 3 1 2 0 0 2

Amount of Each Receipt this Period

70.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

CHIEF EXECUTIVE OFFICER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1515.00

Transaction ID: B000773S000025L11A1

Full Name (Last, First, Middle Initial)

C. STEVEN J. SHORT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

Amount of Each Receipt this Period

30.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000751S000026L11A1

SUBTOTAL of Receipts This Page (optional)

205.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. STEVEN J. SHORT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 3 1 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B0007736000026L11A1

Full Name (Last, First, Middle Initial)

B. MICHAEL J. SKARUPA

Mailing Address

2668 TROTTER ROAD

City

State

Zip Code

FLORENCE

SC

29501

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

38.50

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1116.50

Transaction ID: B00076780000215L11A1

Full Name (Last, First, Middle Initial)

C. MICHAEL J. SKARUPA

Mailing Address

2668 TROTTER ROAD

City

State

Zip Code

FLORENCE

SC

29501

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

38.50

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1116.50

Transaction ID: B00076880000215L11A1

SUBTOTAL of Receipts This Page (optional)

97.00

TOTAL This Period (last page this line number only)

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ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL J. SKARUPA

Mailing Address

2668 TROTTER ROAD

City

FLORENCE

State

SC

Zip Code

29501

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

38.50

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1118.50

Transaction ID: B0007696000215L11A1

Full Name (Last, First, Middle Initial)

B. JOEL N. SLACKMAN

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

12 / 08 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000753S000049L11A1

Full Name (Last, First, Middle Initial)

C. JOEL N. SLACKMAN

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

12 / 23 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000762S000049L11A1

SUBTOTAL of Receipts This Page (optional)

58.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. SENNETTA SMITH

Mailing Address

229 BRANCH HILL DR.

City

State

Zip Code

ELGIN

SC

29045

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

7.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR, PALMETTO TRAINING

PAYROLL DEDUCTION

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Transaction ID: B000767S000218L11A1

Full Name (Last, First, Middle Initial)

B. SENNETTA SMITH

Mailing Address

229 BRANCH HILL DR.

City

State

Zip Code

ELGIN

SC

29045

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

7.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR, PALMETTO TRAINING

PAYROLL DEDUCTION

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Transaction ID: B000768S000218L11A1

Full Name (Last, First, Middle Initial)

C. SENNETTA SMITH

Mailing Address

229 BRANCH HILL DR.

City

State

Zip Code

ELGIN

SC

29045

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2002

Amount of Each Receipt this Period

7.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR, PALMETTO TRAINING

PAYROLL DEDUCTION

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Transaction ID: B000769S000218L11A1

SUBTOTAL of Receipts This Page (optional) ▶

21.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JODIE SARTOR SOLOW

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 6 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS BLUE SHIELD ASSOCIATION

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Transaction ID: B000753S000050L11A1

Full Name (Last, First, Middle Initial)

B. JODIE SARTOR SOLOW

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS BLUE SHIELD ASSOCIATION

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Transaction ID: B000762S000050L11A1

Full Name (Last, First, Middle Initial)

C. STEVEN A. SPAULDING

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

30.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Transaction ID: B000751S000028L11A1

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

A. Full Name (Last, First, Middle Initial)
STEVEN A. SPAULDING
Mailing Address
1310 G STREET, N.W.
City State Zip Code
WASHINGTON DC 20005
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF ARKANSAS HEALTH INSURER
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 290.00

Date of Receipt
N M / D E / Y Y Y Y
1 2 / 3 1 / 2 0 0 2

Amount of Each Receipt this Period
20.00

PAYROLL DEDUCTION

Transaction ID: B0007736000028L11A1

B. Full Name (Last, First, Middle Initial)
JANET S. SPENCER
Mailing Address
3701 MONROE STREET
City State Zip Code
COLUMBIA SC 29205
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF SOUTH CAROLINA SR ACTUARY
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 232.00

Date of Receipt
N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period
8.00

PAYROLL DEDUCTION

Transaction ID: B0007678000221L11A1

C. Full Name (Last, First, Middle Initial)
JANET S. SPENCER
Mailing Address
3701 MONROE STREET
City State Zip Code
COLUMBIA SC 29205
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF SOUTH CAROLINA SR ACTUARY
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 232.00

Date of Receipt
N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period
8.00

PAYROLL DEDUCTION

Transaction ID: B0007688000221L11A1

SUBTOTAL of Receipts This Page (optional) **36.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JANET S. SPENCER

Mailing Address

3701 MONROE STREET

City

State

Zip Code

COLUMBIA

SC

29205

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 2 0 0 2

Amount of Each Receipt this Period

8.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

SR ACTUARY

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Transaction ID: B0007696000221L11A1

Full Name (Last, First, Middle Initial)

B. SHATON T. STRATTON-DOUGHE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 2 0 0 2

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF ILLINOIS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Transaction ID: B0007575000057L11A1

Full Name (Last, First, Middle Initial)

C. KATHRYN M. SULLIVAN

Mailing Address

14314 COTTINGHAM CT.

City

State

Zip Code

BATON ROUGE

LA

70817-3539

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 1 6 2 0 0 2

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF LOUISIANA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

940.00

Transaction ID: B0007555000009L11A1

SUBTOTAL of Receipts This Page (optional)

88.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. BERNARD M. TALBERT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 6 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

12.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Transaction ID: B000753S000052L11A1

Full Name (Last, First, Middle Initial)

B. BERNARD M. TALBERT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

12.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Transaction ID: B000762S000052L11A1

Full Name (Last, First, Middle Initial)

C. DEAN S. TODARO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 6 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000753S000053L11A1

SUBTOTAL of Receipts This Page (optional)

34.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DEAN S. TODARO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0007626000053L11A1

Full Name (Last, First, Middle Initial)

B. KEITH TOLAR

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 6 / 2 0 0 2

Amount of Each Receipt this Period

20.00

Name of Employer

ADVANCED HEALTH SYSTEMS, INC.

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Transaction ID: B0007545000002L11A1

Full Name (Last, First, Middle Initial)

C. JAMES B. TRIMBLE

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 6 / 2 0 0 2

Amount of Each Receipt this Period

20.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

465.00

Transaction ID: B0007535000054L11A1

SUBTOTAL of Receipts This Page (optional)

50.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JAMES B. TRIMBLE

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

465.00

Transaction ID: B0007626000054L11A1

Full Name (Last, First, Middle Initial)

B. MICHAEL B. UNHJEM

Mailing Address

2122 STERLING ROSE LANE

City

State

Zip Code

FARGO

ND

58104

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

75.00

Name of Employer

NORIDIAN-BC/BS OF NORTH DAKOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Transaction ID: B000758S000037L11A1

Full Name (Last, First, Middle Initial)

C. STEVE VONFANGE

Mailing Address

217 EAST SPRINGS ROAD

City

State

Zip Code

COLUMBIA

SC

29223

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

11.50

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

333.50

Transaction ID: B000767S0000242L11A1

SUBTOTAL of Receipts This Page (optional)

106.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

A. STEVE VONFANGE Full Name (Last, First, Middle Initial) Mailing Address 217 EAST SPRINGS ROAD City State Zip Code COLUMBIA SC 29223 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF SOUTH CAROLINA VICE PRESIDENT Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 333.50		Date of Receipt N M / D E / Y V V V 1 2 / 2 7 / 2 0 0 2 Amount of Each Receipt this Period 11.50 PAYROLL DEDUCTION Transaction ID: B000768S000242L11A1
B. STEVE VONFANGE Full Name (Last, First, Middle Initial) Mailing Address 217 EAST SPRINGS ROAD City State Zip Code COLUMBIA SC 29223 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF SOUTH CAROLINA VICE PRESIDENT Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 333.50		Date of Receipt N M / D E / Y V V V 1 2 / 2 7 / 2 0 0 2 Amount of Each Receipt this Period 11.50 PAYROLL DEDUCTION Transaction ID: B000768S000242L11A1
C. JERRY W. WARD Full Name (Last, First, Middle Initial) Mailing Address 1310 G STREET N.W. City State Zip Code WASHINGTON DC 20005 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF TENNESSEE HEALTH INSURER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 249.60		Date of Receipt N M / D E / Y V V V 1 2 / 1 2 / 2 0 0 2 Amount of Each Receipt this Period 19.20 PAYROLL DEDUCTION Transaction ID: B000750S000087L11A1

SUBTOTAL of Receipts This Page (optional) ▶ **42.20**
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JERRY W. WARD

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 3 1 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

19.20

Name of Employer
BC/BS OF TENNESSEE

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

249.60

Transaction ID: B000771S000087L11A1

Full Name (Last, First, Middle Initial)

B. JAMIE O. WATSON

Mailing Address

1048 GARDEN STREET

City

State

Zip Code

LAMAR

SC

29069

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

5.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation
DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Transaction ID: B000767S000245L11A1

Full Name (Last, First, Middle Initial)

C. JAMIE O. WATSON

Mailing Address

1048 GARDEN STREET

City

State

Zip Code

LAMAR

SC

29069

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

5.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation
DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Transaction ID: B000768S000245L11A1

SUBTOTAL of Receipts This Page (optional)

29.20

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JAMIE O. WATSON

Mailing Address

1048 GARDEN STREET

City

LAMAR

State

SC

Zip Code

29069

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

5.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Transaction ID: B000769S000245L11A1

Full Name (Last, First, Middle Initial)

B. JANINE L. WEIDEMAN

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

12 / 23 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

NORIDIAN-BC/BS OF NORTH DAKOTA

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000758S000039L11A1

Full Name (Last, First, Middle Initial)

C. PAUL M. WHITE

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

60.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Transaction ID: B000751S000030L11A1

SUBTOTAL of Receipts This Page (optional) ▶

85.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. PAUL M. WHITE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 3 1 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer
BC/BS OF ARKANSAS

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Transaction ID: B0007736000030L11A1

Full Name (Last, First, Middle Initial)

B. RICHARD WHITTEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer
BC/BS OF NORTH DAKOTA

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0007585000040L11A1

Full Name (Last, First, Middle Initial)

C. DWIGHT M. WICKER

Mailing Address

1813 BRIGADOONE LANE

City

State

Zip Code

FLORENCE

SC

29505

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

28.92

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation
VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

780.68

Transaction ID: B0007675000260L11A1

SUBTOTAL of Receipts This Page (optional)

86.92

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DWIGHT M. WICKER

Mailing Address

1813 BRIGADOONE LANE

City

FLORENCE

State

SC

Zip Code

29505

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

28.92

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

780.68

Transaction ID: B000768S000250L11A1

Full Name (Last, First, Middle Initial)

B. DWIGHT M. WICKER

Mailing Address

1813 BRIGADOONE LANE

City

FLORENCE

State

SC

Zip Code

29505

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

28.92

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

780.68

Transaction ID: B000768S000250L11A1

Full Name (Last, First, Middle Initial)

C. STEPHEN K. WIGGINS

Mailing Address

510 WINDING WAY

City

COLUMBIA

State

SC

Zip Code

29212

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

SR VICE PRESIDENT & CIO

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Transaction ID: B000767S000251L11A1

SUBTOTAL of Receipts This Page (optional)

93.84

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. STEPHEN K. WIGGINS

Mailing Address

510 WINDING WAY

City

COLUMBIA

State

SC

Zip Code

29212

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

SR VICE PRESIDENT & CIO

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Transaction ID: B000768S000251L11A1

Full Name (Last, First, Middle Initial)

B. STEPHEN K. WIGGINS

Mailing Address

510 WINDING WAY

City

COLUMBIA

State

SC

Zip Code

29212

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

SR VICE PRESIDENT & CIO

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Transaction ID: B000768S000251L11A1

Full Name (Last, First, Middle Initial)

C. ROGER G. WILSON

Mailing Address

390 N. JEFFERSON COURT #2004

City

CHICAGO

State

IL

Zip Code

60661

Date of Receipt

12 / 18 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

1000.00

Name of Employer

BLUE CROSS BLUE SHIELD OF OKLAHOMA

Occupation

SENIOR VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Transaction ID: B000736S000001L11A1

SUBTOTAL of Receipts This Page (optional)

1080.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. SHERMAN M. WOLFF

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 3 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer
BC/BS OF ILLINOIS

Occupation
HEALTH INSURER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Transaction ID: B000757S000058L11A1

Full Name (Last, First, Middle Initial)

B. JOSEPH WRIGHT

Mailing Address

535 OLD CHEROKEE ROAD

City

State

Zip Code

LEXINGTON

SC

29072

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.19

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation
MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

320.11

Transaction ID: B000767S000280L11A1

Full Name (Last, First, Middle Initial)

C. JOSEPH WRIGHT

Mailing Address

535 OLD CHEROKEE ROAD

City

State

Zip Code

LEXINGTON

SC

29072

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 2 7 / 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.19

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation
MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

320.11

Transaction ID: B000768S000280L11A1

SUBTOTAL of Receipts This Page (optional)

60.38

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOSEPH WRIGHT

Mailing Address

535 OLD CHEROKEE ROAD

City

LEXINGTON

State

SC

Zip Code

29072

Date of Receipt

12 / 27 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.19

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

MANAGER

PAYROLL DEDUCTION

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

320.11

Transaction ID: B0007696000260L11A1

B.

C.

SUBTOTAL of Receipts This Page (optional)

20.19

TOTAL This Period (last page this line number only)

10113.37

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. CAREPAC OF KANSAS BLUE CROSS BLUE SHIELD

Mailing Address

1133 TOPEKA BOULEVARD, SW

City

TOPEKA

State

KS

Zip Code

66629

Date of Receipt

12 / 23 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

583.00

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

7516.00

Transaction ID: B000756S000001L12

Full Name (Last, First, Middle Initial)

B. EMPIRE HEALTHCHOICE P.A.C.

Mailing Address

11 WEST 42ND STREET

City

NEW YORK

State

NY

Zip Code

10036

Date of Receipt

12 / 18 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

2500.00

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Transaction ID: B000752S000001L12

Full Name (Last, First, Middle Initial)

C. HIGHMARK HEALTH PAC

Mailing Address

1800 CENTER STREET

City

CAMP HILL

State

PA

Zip Code

17089-0089

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

5000.00

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

14000.00

Transaction ID: B000740S000001L12

SUBTOTAL of Receipts This Page (optional) ▶

8083.00

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)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. P.A.C. OF PENNSYLVANIA'S BLUE CROSS PLANS

Mailing Address

P.O. BOX 80710

City

State

Zip Code

HARRISBURG

PA

17106-0710

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

500.00

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Transaction ID: B0007386000001L12

Full Name (Last, First, Middle Initial)

B. REGENCE BLUEPAC

Mailing Address

2880 E. COTTONWOOD PARKWAY

DEPT. #8

City

State

Zip Code

SALT LAKE CITY

UT

84121

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

7000.00

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

14000.00

Transaction ID: B0007395000001L12

C.

SUBTOTAL of Receipts This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

15583.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. TEAM SUNUNU

Mailing Address

P.O. BOX 500

City

State

Zip Code

RYE

NH

03870

Date of Receipt

12 / 12 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

500.00

Name of Employer

Occupation

REFUND

Receipt For:

2002

Aggregate Year-to-Date ▼

X Primary

General

Other (specify) ▼

500.00

Transaction ID: B000737S000001L16

Full Name (Last, First, Middle Initial)

B. JOHN THUNE FOR SOUTH DAKOTA

Mailing Address

P.O. BOX 516

City

State

Zip Code

SIOUX FALLS

SD

57101

Date of Receipt

12 / 31 / 2002

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

1200.00

Name of Employer

Occupation

REFUND

Receipt For:

2002

Aggregate Year-to-Date ▼

Primary

X General

Other (specify) ▼

1200.00

Transaction ID: B000770S000001L16

C.

SUBTOTAL of Receipts This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

1700.00

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. COMERICA BANK

Mailing Address

P.O. BOX 75000

City

DETROIT

State

MI

Zip Code

48375-2250

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 2 2 0 0 2

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

26.77

Name of Employer

Occupation

NOVEMBER INTEREST INCOME

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

623.42

Transaction ID: B0007346000001L17

B.

C.

SUBTOTAL of Receipts This Page (optional)

26.77

TOTAL This Period (last page this line number only)

26.77

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (in full)
 BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial) A. IMPACT AMERICA			Date of Disbursement 12 / 04 / 2002	
Mailing Address 228 S. WASHINGTON STREET SUITE 200 City State Zip Code ALEXANDRIA VA 22314			Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Candidate Name			24K Category/ Type	
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼		Transaction ID: B000733S000005L23	
State: District:				
Full Name (Last, First, Middle Initial) B. PIONEER PAC			Date of Disbursement 12 / 04 / 2002	
Mailing Address 412 FIRST STREET, SE SUITE 100 City State Zip Code WASHINGTON DC 20003			Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Candidate Name			24K Category/ Type	
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼		Transaction ID: B000733S000007L23	
State: District:				
Full Name (Last, First, Middle Initial) C. PIONEER PAC			Date of Disbursement 12 / 30 / 2002	
Mailing Address 412 FIRST STREET, SE SUITE 100 City State Zip Code WASHINGTON DC 20003			Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Candidate Name			24K Category/ Type	
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼		Transaction ID: B000736S000002L23	
State: District:				

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)
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NAME OF COMMITTEE (in full)
 BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial) A. PRYCE PROJECT			Date of Disbursement 12 / 04 / 2002	
Mailing Address 1200 TRINITY DRIVE City ALEXANDRIA State VA Zip Code 22314 Purpose of Disbursement			Amount of Each Disbursement this Period 1000.00	
Candidate Name			24K Category/ Type	
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼		Transaction ID: B000733S000002L23	
State: District:				
Full Name (Last, First, Middle Initial) B. PRYCE PROJECT			Date of Disbursement 12 / 30 / 2002	
Mailing Address 1200 TRINITY DRIVE City ALEXANDRIA State VA Zip Code 22314 Purpose of Disbursement			Amount of Each Disbursement this Period 500.00	
Candidate Name			24K Category/ Type	
Office Sought: House Senate President	Disbursement For: 2002 Primary X General Other (specify) ▼		Transaction ID: B000736S000003L23	
State: District:				
Full Name (Last, First, Middle Initial) C. FRIENDS OF MARK FOLEY			Date of Disbursement 12 / 04 / 2002	
Mailing Address P.O. BOX 30505 City PALM BEACH GARDENS State FL Zip Code 33420 Purpose of Disbursement			Amount of Each Disbursement this Period 2500.00	
Candidate Name MARK FOLEY			24K Category/ Type	
Office Sought: X House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		Transaction ID: B000733S000003L23	
State: FL District: 24				
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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☐ 26	☐ 27	☐ 28a	☐ 28b	☐ 28c
☐ 29				

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NAME OF COMMITTEE (in full)
 BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial) A. CHAMBLISS FOR SENATE			Date of Disbursement 12 / 04 / 2002	
Mailing Address P.O. BOX 12469 City ATLANTA State GA Zip Code 30355			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 GENERAL DEBT RETIREMENT			24K Category/ Type	
Candidate Name SAXBY CHAMBLISS				
Office Sought: House X Senate President		Disbursement For: 2002 Primary X General Other (specify) ▼		
State: GA District:		Transaction ID: B000733S000004L23		
Full Name (Last, First, Middle Initial) B. CITIZENS FOR BUNNING			Date of Disbursement 12 / 04 / 2002	
Mailing Address 1717 DIXIE HIGHWAY SUITE 18D City FORT WRIGHT State KY Zip Code 41011			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement			24K Category/ Type	
Candidate Name JIM BUNNING				
Office Sought: House X Senate President		Disbursement For: 2004 X Primary General Other (specify) ▼		
State: KY District:		Transaction ID: B000733S000006L23		
Full Name (Last, First, Middle Initial) C. FRIENDS OF BYRON DORGAN			Date of Disbursement 12 / 04 / 2002	
Mailing Address 203 C STREET, NE City WASHINGTON State DC Zip Code 20002			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement			24K Category/ Type	
Candidate Name BYRON DORGAN				
Office Sought: House X Senate President		Disbursement For: 2004 X Primary General Other (specify) ▼		
State: ND District:		Transaction ID: B000733S000001L23		
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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☐ 26	☐ 27	☐ 28a	☐ 28b	☐ 28c
☐ 29				

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NAME OF COMMITTEE (in full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial) A. WILSON FOR CONGRESS Mailing Address P.O. BOX 2168 City WEST COLUMBIA State SC Zip Code 29171 Purpose of Disbursement Candidate Name JOE WILSON Office Sought: ☒ House ☐ Senate ☐ President State: SC District: 02 Disbursement For: 2004 ☒ Primary ☐ General Other (specify) ▼			Date of Disbursement 12 / 04 / 2002 Amount of Each Disbursement this Period 1000.00 Transaction ID: B000733S000009L23
Full Name (Last, First, Middle Initial) B. TIM JOHNSON FOR SOUTH DAKOTA Mailing Address 420 C STREET, NE LOWER LEVEL City WASHINGTON State DC Zip Code 20002 Purpose of Disbursement 2002 GENERAL DEBT RETIREMENT Candidate Name TIM JOHNSON Office Sought: ☐ House ☒ Senate ☐ President State: SD District: Disbursement For: 2002 ☐ Primary ☒ General Other (specify) ▼			Date of Disbursement 12 / 04 / 2002 Amount of Each Disbursement this Period 1000.00 Transaction ID: B000733S000009L23
Full Name (Last, First, Middle Initial) C. CUBIN FOR CONGRESS Mailing Address P.O. BOX 4857 City CASPER State WY Zip Code 82604 Purpose of Disbursement Candidate Name BARBARA CUBIN Office Sought: ☒ House ☐ Senate ☐ President State: WY District: 01 Disbursement For: 2004 ☒ Primary ☐ General Other (specify) ▼			Date of Disbursement 12 / 30 / 2002 Amount of Each Disbursement this Period 1500.00 Transaction ID: B000736S000001L23
SUBTOTAL of Disbursements This Page (optional) ▶			3500.00
TOTAL This Period (last page this line number only) ▶			17000.00