

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Bluepac - Blue Cross Blue Shield Association Pac

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		<input type="text" value="154072.24"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="170401.68"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="16751.42"/>	<input type="text" value="372430.86"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="187153.10"/>	<input type="text" value="526503.10"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="35500.00"/>	<input type="text" value="374850.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="151653.10"/>	<input type="text" value="151653.10"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

Write or Type Committee Name

Bluepac - Blue Cross Blue Shield Association Pac

Report Covering the Period: From: 08 / 01 / 2018 To: 08 / 31 / 2018

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10158.22	109684.90
(ii) Unitemized	1093.20	33957.96
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	11251.42	143642.86
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	11251.42	153642.86
12. Transfers From Affiliated/Other Party Committees.....	5500.00	208288.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	10500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	16751.42	372430.86
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	16751.42	372430.86

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	35500.00	374850.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	35500.00	374850.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35500.00	374850.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	11251.42	153642.86
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11251.42	153642.86
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

This report is being amended to include receipts that were left off of the original report

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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 Association Pac

A. Anderson, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 257 W Genesee St
 City Buffalo State NY Zip Code 14202-2657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthNow New York Inc. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 616.00

Date of Receipt 08 / 13 / 2018
Transaction ID : AA984D076B2244E4B684
 Amount of Each Receipt this Period 115.50
 Memo Item

B. Aronson, Naomi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Clin Eval Inn Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-58
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Aronson, Naomi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Clin Eval Inn Policy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-58
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	145.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Bailey, James, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 8084
 ATTN PAYROLL
 City Little Rock State AR Zip Code 72203-8084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS of Arkansas Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 16 / 2018
Transaction ID : 2018091016134-2
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Banta, John, Edwards, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Exec Dir Venture Fund
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-42
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Banta, John, Edwards, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Exec Dir Venture Fund
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-42
 Amount of Each Receipt this Period 15.00
 Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Barkach, Jim, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Strategic Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-32
 Amount of Each Receipt this Period 35.00
 Memo Item

B. Barkach, Jim, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Strategic Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-32
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BARNETT, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 8084 ATTN PAYROLL
 City Little Rock State AR Zip Code 72203-8084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAbLe Mutual Insurance Company Occupation (for Individual) SRVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 02 / 2018
Transaction ID : 2018091016134-5
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BARNETT, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 8084
 ATTN PAYROLL
 City Little Rock State AR Zip Code 72203-8084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USABLE Mutual Insurance Company Occupation (for Individual) SRVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 16 / 2018
Transaction ID : 2018091016134-6
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Birtch, Sean, Bradley, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Manager LFS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-71
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Birtch, Sean, Bradley, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Manager LFS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-71
 Amount of Each Receipt this Period 25.00
 Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Black, Garrett E, , ,

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

Mailing Address 3535 Blue Cross Rd

City Eagan	State MN	Zip Code 55122-1154
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot	Occupation (for Individual) VP Sr Health Services
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2018

Transaction ID : 2018080717254-7

Amount of Each Receipt this Period
50.00

Memo Item

B. Black, Garrett E, , ,

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

Mailing Address 3535 Blue Cross Rd

City Eagan	State MN	Zip Code 55122-1154
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot	Occupation (for Individual) VP Sr Health Services
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : 2018082119133-7

Amount of Each Receipt this Period
50.00

Memo Item

C. BLOODWORTH, JAMES, , ,

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

Mailing Address PO Box 8084
ATTN PAYROLL

City Little Rock	State AR	Zip Code 72203-8084
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) USAbLe Mutual Insurance Company	Occupation (for Individual) VP
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2018

Transaction ID : 2018091016134-22

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	115.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 89
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Bolton, Kimberly, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13320 Redspire Dr
 City Silver Spring State MD Zip Code 20906-6741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED OPR Comm Pln Admn
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-93
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Bolton, Kimberly, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13320 Redspire Dr
 City Silver Spring State MD Zip Code 20906-6741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED OPR Comm Pln Admn
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-93
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Breskin, William, Adam, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1703 Hunts End Ct
 City Vienna State VA Zip Code 22182-1833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) SVP Government Programs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1685.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-120
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 89
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Breskin, William, Adam, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1703 Hunts End Ct
 City Vienna State VA Zip Code 22182-1833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) SVP Government Programs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1685.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-121
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BRIDGES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 8084 ATTN PAYROLL
 City Little Rock State AR Zip Code 72203-8084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAbLe Mutual Insurance Company Occupation (for Individual) EXVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 02 / 2018
Transaction ID : 2018091016134-29
 Amount of Each Receipt this Period 25.00
 Memo Item

C. BRIDGES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 8084 ATTN PAYROLL
 City Little Rock State AR Zip Code 72203-8084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAbLe Mutual Insurance Company Occupation (for Individual) EXVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 16 / 2018
Transaction ID : 2018091016134-30
 Amount of Each Receipt this Period 25.00
 Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Brown, Teresa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1916 Village Green Dr
 City Hyattsville State MD Zip Code 20785-4117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Office Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt **08 / 09 / 2018**
Transaction ID : 2018080716416-97
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Brown, Teresa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1916 Village Green Dr
 City Hyattsville State MD Zip Code 20785-4117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Office Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt **08 / 23 / 2018**
Transaction ID : 2018082117134-97
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Burrows, Denise, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 N Cameron St
 City Sterling State VA Zip Code 20164-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Business Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt **08 / 09 / 2018**
Transaction ID : 2018080716416-104
 Amount of Each Receipt this Period 20.00
 Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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 Association Pac

A. Burrows, Denise, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 N Cameron St
 City Sterling State VA Zip Code 20164-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Business Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-105
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Canchester, Paul, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir Strategic Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1005.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-62
 Amount of Each Receipt this Period 65.00
 Memo Item

C. Canchester, Paul, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir Strategic Services
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1005.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-62
 Amount of Each Receipt this Period 65.00
 Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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 Association Pac

A. Carson, Dwayne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Federal Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-4
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Carson, Dwayne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Federal Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-4
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Cerisano, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5552 Sequoia Farms Dr
 City Centreville State VA Zip Code 20120-3302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Federal Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1615.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-107
 Amount of Each Receipt this Period 95.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	195.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Cerisano, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5552 Sequoia Farms Dr
 City Centreville State VA Zip Code 20120-3302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Federal Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1615.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-108
 Amount of Each Receipt this Period 95.00
 Memo Item

B. Choudhri, Anshuman, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2250 Clarendon Blvd
 City Arlington State VA Zip Code 22201-3332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Value Based Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-102
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Choudhri, Anshuman, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2250 Clarendon Blvd
 City Arlington State VA Zip Code 22201-3332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Value Based Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-102
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	145.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Cooney, Terrence, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Investments & NEBA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1105.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-75
 Amount of Each Receipt this Period 65.00
 Memo Item

B. Cooney, Terrence, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Investments & NEBA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1105.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-75
 Amount of Each Receipt this Period 65.00
 Memo Item

C. Corso, David, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED PlanConnexion
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-23
 Amount of Each Receipt this Period 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	190.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 89
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Corso, David, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED PlanConnexion
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-23
 Amount of Each Receipt this Period 60.00
 Memo Item

B. D'Addezio, Nick, James, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Strategic Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-59
 Amount of Each Receipt this Period 35.00
 Memo Item

C. D'Addezio, Nick, James, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Strategic Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-59
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 89
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Davis, Mitchell, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Mgr External Audit
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-9
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Davis, Mitchell, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Mgr External Audit
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-9
 Amount of Each Receipt this Period 20.00
 Memo Item

C. DeCicco, Vincent, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Infra Supp and Net
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-77
 Amount of Each Receipt this Period 20.00
 Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Bluepac - Blue Cross Blue Shield Association Pac

A. DeCicco, Vincent, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Infra Supp and Net
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-77
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Didawick, Kathy, Ripley, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6760 25th St N
 City Arlington State VA Zip Code 22213-1103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Congressional Comm
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1615.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-109
 Amount of Each Receipt this Period 95.00
 Memo Item

C. Didawick, Kathy, Ripley, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6760 25th St N
 City Arlington State VA Zip Code 22213-1103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Congressional Comm
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1615.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-110
 Amount of Each Receipt this Period 95.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. DuMoulin, John, Philip, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3115 Juniper Ln
 City Falls Church State VA Zip Code 22044-1813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED OPM & Govt Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 986.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-108
 Amount of Each Receipt this Period 58.00
 Memo Item

B. DuMoulin, John, Philip, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3115 Juniper Ln
 City Falls Church State VA Zip Code 22044-1813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED OPM & Govt Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 986.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-109
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Duncan, Jeremy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 Exchange St
 City Providence State RI Zip Code 02903-2630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross Blue Shield Rhode Island Occupation (for Individual) Mng Dir Strategic Planning
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 10 / 2018
Transaction ID : 201808089534-3
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	136.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Duncan, Jeremy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 Exchange St
 City Providence State RI Zip Code 02903-2630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross Blue Shield Rhode Island Occupation (for Individual) Mng Dir Strategic Planning
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 24 / 2018
Transaction ID : 2018082116134-3
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Eiting, Paul, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 S Payne St
 City Alexandria State VA Zip Code 22314-3930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Legislative and Regulatory Policy Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-114
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Eiting, Paul, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 S Payne St
 City Alexandria State VA Zip Code 22314-3930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Legislative and Regulatory Policy Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-115
 Amount of Each Receipt this Period 20.00
 Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Enright, Diane, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Finance Business Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-26
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Enright, Diane, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Finance Business Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-26
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Felker, Lyn, Bronsema, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6600 Comet Cir
 City Springfield State VA Zip Code 22150-4533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir Ben Dev and Admin
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-111
 Amount of Each Receipt this Period 25.00
 Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Felker, Lyn, Bronsema, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6600 Comet Cir
 City Springfield State VA Zip Code 22150-4533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir Ben Dev and Admin
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-112
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Flamm, Carole, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Medical Director Clinical Content
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-19
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Flamm, Carole, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Medical Director Clinical Content
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-19
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 89
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Association Pac

A. Gerrard, Paul, John Julian, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1416 Willow Ave
 City Louisville State KY Zip Code 40204-2508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Strategic Comm
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 986.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-84
 Amount of Each Receipt this Period 58.00
 Memo Item

B. Gerrard, Paul, John Julian, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1416 Willow Ave
 City Louisville State KY Zip Code 40204-2508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Strategic Comm
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 986.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-84
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Griffin, Janice, Catherine, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Inter Plan Programs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-35
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	136.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Griffin, Janice, Catherine, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Inter Plan Programs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-35
 Amount of Each Receipt this Period 20.00
 Memo Item

B. GULLESON, PAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX
 City RUTLAND State ND Zip Code 58067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Noridian Mutual Insurance Company Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 03 / 2018
Transaction ID : 2018080610336-14
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Hagen, Stuart, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 S Washington St
 City Rockville State MD Zip Code 20850-4420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Health Pol Analytics
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-96
 Amount of Each Receipt this Period 25.00
 Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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 Association Pac

A. Hagen, Stuart, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 S Washington St
 City Rockville State MD Zip Code 20850-4420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Health Pol Analytics
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-96
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Haltmeyer, Kris, O, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Legislative & Reg Pol
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 986.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-8
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Haltmeyer, Kris, O, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Legislative & Reg Pol
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 986.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-8
 Amount of Each Receipt this Period 58.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	141.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Hamil, Louise, Stork, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4005 Carson Pl
 City Alexandria State VA Zip Code 22304-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED FEP Information Sys
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-110
 Amount of Each Receipt this Period 35.00
 Memo Item

B. Hamil, Louise, Stork, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4005 Carson Pl
 City Alexandria State VA Zip Code 22304-1745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED FEP Information Sys
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-111
 Amount of Each Receipt this Period 35.00
 Memo Item

C. Handelman, Justine, Germann, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9915 Hillridge Dr
 City Kensington State MD Zip Code 20895-3230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Sr VP Policy & Rep
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-91
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	220.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Handelman, Justine, Germann, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9915 Hillridge Dr
 City Kensington State MD Zip Code 20895-3230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Sr VP Policy & Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-91
 Amount of Each Receipt this Period 150.00
 Memo Item

B. Hayes, Cain-Aten, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) EVP COO & Pres Health Business
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt 08 / 10 / 2018
Transaction ID : 2018080717254-11
 Amount of Each Receipt this Period 150.00
 Memo Item

C. Hayes, Cain-Aten, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) EVP COO & Pres Health Business
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt 08 / 24 / 2018
Transaction ID : 2018082119133-11
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 89
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Hays, Philip, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4037 35th St N
 City Arlington State VA Zip Code 22207-4427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Congressional Relation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1545.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-115
 Amount of Each Receipt this Period 95.00
 Memo Item

B. Hays, Philip, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4037 35th St N
 City Arlington State VA Zip Code 22207-4427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Congressional Relation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1545.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-116
 Amount of Each Receipt this Period 95.00
 Memo Item

C. Hedges, Kari, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) SVP Comm Mkts Data Strat
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1275.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-46
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	265.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Hedges, Kari, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) SVP Comm Mkts Data Strat
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1275.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-46
 Amount of Each Receipt this Period 75.00
 Memo Item

B. Henderson, Kimberley, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 8084 ATTN PAYROLL
 City Little Rock State AR Zip Code 72203-8084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS of Arkansas Occupation (for Individual) Health Insurer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 16 / 2018
Transaction ID : 2018091016134-14
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Holland, Kim, Diane, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4952 Westbriar Dr
 City Fort Worth State TX Zip Code 76109-3132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP State Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1445.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-100
 Amount of Each Receipt this Period 85.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 89
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Holland, Kim, Diane, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4952 Westbriar Dr
 City Fort Worth State TX Zip Code 76109-3132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP State Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1445.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-100
 Amount of Each Receipt this Period 85.00
 Memo Item

B. Holt, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 8084 ATTN PAYROLL
 City Little Rock State AR Zip Code 72203-8084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS of Arkansas Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.06

Date of Receipt 08 / 16 / 2018
Transaction ID : 2018091016134-10
 Amount of Each Receipt this Period 14.29
 Memo Item

C. Horky, Kathy, Grace, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Strategic Services
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-47
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	124.29
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Horky, Kathy, Grace, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Strategic Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-47
 Amount of Each Receipt this Period 25.00
 Memo Item

B. HOUN, MEGAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2509 E Boulevard Ave
 City Bismarck State ND Zip Code 58501-3045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Noridian Mutual Insurance Company Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 03 / 2018
Transaction ID : 2018080610336-15
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Huckle, Tim, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4111 S Rivershore Dr
 City Moorhead State MN Zip Code 56560-5626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Noridian Occupation (for Individual) Health Insurer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1066.64

Date of Receipt 08 / 03 / 2018
Transaction ID : 2018080610336-16
 Amount of Each Receipt this Period 133.33
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	208.33
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Hussain, Noor, Mohamed, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Enterprise Architect II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-61
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Hussain, Noor, Mohamed, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Enterprise Architect II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-61
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Iadicicco, Robert, George, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6002 Madison
 City Overlook Ct State VA Zip Code 22041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Associate Counsel II
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-118
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Iadicco, Robert, George, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6002 Madison
 City Overlook Ct State VA Zip Code 22041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Associate Counsel II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-119
 Amount of Each Receipt this Period 35.00
 Memo Item

B. Jackson, Veronica, Esther, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Planning & Outreach
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-11
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Jackson, Veronica, Esther, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Planning & Outreach
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-11
 Amount of Each Receipt this Period 20.00
 Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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 Association Pac

A. James, Anthony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 8084
 ATTN PAYROLL
 City Little Rock State AR Zip Code 72203-8084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USABLE Mutual Insurance Company Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 08 / 16 / 2018
Transaction ID : 2018091016134-12
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Jones, Keir, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir Financial Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 08 / 09 / 2018
Transaction ID : 2018080716416-48
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Jones, Keir, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir Financial Ops
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 08 / 23 / 2018
Transaction ID : 2018082117134-48
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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 Association Pac

A. Joyce Jr., Mike, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 N Michigan Ave

City Chicago	State IL	Zip Code 60601-7757
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) VP Chief Aud and Comp Off
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1105.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : 2018080716416-43

Amount of Each Receipt this Period
65.00

Memo Item

B. Joyce Jr., Mike, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 N Michigan Ave

City Chicago	State IL	Zip Code 60601-7757
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) VP Chief Aud and Comp Off
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1105.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2018

Transaction ID : 2018082117134-43

Amount of Each Receipt this Period
65.00

Memo Item

C. Karlsruher, David, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11408 SW Oaks

City Austin	State TX	Zip Code 78737-9405
----------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) Dir Grassrts and Advocacy
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : 2018080716416-99

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	180.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 39 OF 89
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Association Pac

A. Karlsruhe, David, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11408 SW Oaks
 City Austin State TX Zip Code 78737-9405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir Grassrts and Advocacy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-99
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Keck, Kim, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 Exchange St
 City Providence State RI Zip Code 02903-2630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS of Rhose Island Occupation (for Individual) Presidents Office
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1530.00

Date of Receipt 08 / 10 / 2018
Transaction ID : 201808089534-5
 Amount of Each Receipt this Period 90.00
 Memo Item

C. Keck, Kim, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 Exchange St
 City Providence State RI Zip Code 02903-2630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS of Rhose Island Occupation (for Individual) Presidents Office
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1530.00

Date of Receipt 08 / 24 / 2018
Transaction ID : 2018082116134-5
 Amount of Each Receipt this Period 90.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	230.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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 Association Pac

A. Keefer, Scott, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3535 Blue Cross Rd

City Eagan	State MN	Zip Code 55122-1154
---------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot	Occupation (for Individual) VP Public Affairs
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2018

Transaction ID : 2018080717254-8

Amount of Each Receipt this Period
25.00

Memo Item

B. Keefer, Scott, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3535 Blue Cross Rd

City Eagan	State MN	Zip Code 55122-1154
---------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot	Occupation (for Individual) VP Public Affairs
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : 2018082119133-8

Amount of Each Receipt this Period
25.00

Memo Item

C. Kelly, Peter, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 N Michigan Ave

City Chicago	State IL	Zip Code 60601-7757
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) Chief Emp Benefit Counsel
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
680.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : 2018080716416-64

Amount of Each Receipt this Period
40.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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

A. Kelly, Peter, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Chief Emp Benefit Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-64
 Amount of Each Receipt this Period 40.00
 Memo Item

B. Kocher, Gail, Susan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir Health Info Tech
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-31
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Kocher, Gail, Susan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir Health Info Tech
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-31
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Kolodgy, Bob, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) EVP and CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1870.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-68
 Amount of Each Receipt this Period 110.00
 Memo Item

B. Kolodgy, Bob, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) EVP and CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1870.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-68
 Amount of Each Receipt this Period 110.00
 Memo Item

C. Korabik, Joseph, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Chief Actuary LFS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-44
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	270.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Korabik, Joseph, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Chief Actuary LFS
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-44
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Krause, Robert, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir Service Operations
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-67
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Krause, Robert, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir Service Operations
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-67
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Labus, Carl, Andrew, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD LFS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-18
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Labus, Carl, Andrew, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD LFS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-18
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Lauderback, Jim, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Tech Solutions Fellow
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-33
 Amount of Each Receipt this Period 30.00
 Memo Item

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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 89
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Lauderback, Jim, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Tech Solutions Fellow
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-33
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Leahey Jr, Robert, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Lic and Comp LFS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-66
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Leahey Jr, Robert, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Lic and Comp LFS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-66
 Amount of Each Receipt this Period 20.00
 Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Lederberg, Michele, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 92 Laurel Ave
 City Providence State RI Zip Code 02906-4221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS of Rhode Island Occupation (for Individual) Svp
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 08 / 10 / 2018
Transaction ID : 201808089534-6
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Lederberg, Michele, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 92 Laurel Ave
 City Providence State RI Zip Code 02906-4221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS of Rhode Island Occupation (for Individual) Svp
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 08 / 24 / 2018
Transaction ID : 2018082116134-6
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Lubrant, Brad, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Finance
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-16
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Lubrant, Brad, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Finance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-16
 Amount of Each Receipt this Period 40.00
 Memo Item

B. Lulla, Nisha, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Office of the President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-60
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Lulla, Nisha, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Office of the President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-60
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	140.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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 Association Pac

A. Lynch, Scott B., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3535 Blue Cross Rd

City Eagan	State MN	Zip Code 55122-1154
---------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot	Occupation (for Individual) VP Sr Chief Legal Officer
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	10	/	2018

Transaction ID : 2018080717254-6

Amount of Each Receipt this Period
20.00

Memo Item

B. Lynch, Scott B., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3535 Blue Cross Rd

City Eagan	State MN	Zip Code 55122-1154
---------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot	Occupation (for Individual) VP Sr Chief Legal Officer
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2018

Transaction ID : 2018082119133-6

Amount of Each Receipt this Period
20.00

Memo Item

C. Manocchia, Augustine, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 Cassandra Ln

City N Kingstown	State RI	Zip Code 02852-3410
---------------------	-------------	------------------------

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

Name of Employer (for Individual) BCBS of Rhode Island	Occupation (for Individual) Medical Officer
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	10	/	2018

Transaction ID : 201808089534-8

Amount of Each Receipt this Period
20.00

Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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 Association Pac

A. Manocchia, Augustine, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 Cassandra Ln

City N Kingstown	State RI	Zip Code 02852-3410
---------------------	-------------	------------------------

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

Name of Employer (for Individual) BCBS of Rhode Island	Occupation (for Individual) Medical Officer
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : 2018082116134-8

Amount of Each Receipt this Period
20.00

Memo Item

B. Marek, Annette, Renata, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 N Michigan Ave

City Chicago	State IL	Zip Code 60601-7757
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) MD Off of the President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : 2018080716416-14

Amount of Each Receipt this Period
30.00

Memo Item

C. Marek, Annette, Renata, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 N Michigan Ave

City Chicago	State IL	Zip Code 60601-7757
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) MD Off of the President
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2018

Transaction ID : 2018082117134-14

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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 Association Pac

A. Marek, Matthew W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) VP BCBSM/President SelectAccount
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 08 / 10 / 2018
Transaction ID : 2018080717254-4
 Amount of Each Receipt this Period 35.00
 Memo Item

B. Marek, Matthew W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) VP BCBSM/President SelectAccount
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 08 / 24 / 2018
Transaction ID : 2018082119133-4
 Amount of Each Receipt this Period 35.00
 Memo Item

C. Marks-Salama, Michelle, Dianne, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Associate Actuary
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-56
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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 Association Pac

A. Marks-Salama, Michelle, Dianne, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Associate Actuary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-56
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Marsden, Alun, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Sr Proj Dir Port Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-13
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Marsden, Alun, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Sr Proj Dir Port Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-13
 Amount of Each Receipt this Period 15.00
 Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Masiello Rotunno, Melissa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Dep Genl Counsel Brand
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-54
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Masiello Rotunno, Melissa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Dep Genl Counsel Brand
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-54
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Matushak, Jay S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) VP Sr CFO & Assistant Secretary
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1105.00

Date of Receipt 08 / 10 / 2018
Transaction ID : 2018080717254-9
 Amount of Each Receipt this Period 65.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Matushak, Jay S, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3535 Blue Cross Rd

City Eagan	State MN	Zip Code 55122-1154
---------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesota	Occupation (for Individual) VP Sr CFO & Assistant Secretary
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1105.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : 2018082119133-9

Amount of Each Receipt this Period
65.00

Memo Item

B. McClure, Clay, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3509 7th St N

City Arlington	State VA	Zip Code 22201-2301
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) MD State Affairs
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
577.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2018

Transaction ID : 2018082117134-104

Amount of Each Receipt this Period
38.50

Memo Item

C. McLean, Jelani, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 N Michigan Ave

City Chicago	State IL	Zip Code 60601-7757
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) MD CHM Strat Exec
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : 2018080716416-36

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	128.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. McLean, Jelani, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD CHM Strat Exec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-36
 Amount of Each Receipt this Period 25.00
 Memo Item

B. McMahon, Jane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) VP Ethics & Compliance & Privacy Offi
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 10 / 2018
Transaction ID : 2018080717254-1
 Amount of Each Receipt this Period 50.00
 Memo Item

C. McMahon, Jane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) VP Ethics & Compliance & Privacy Office
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 24 / 2018
Transaction ID : 2018082119133-1
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 Association Pac

A. Meeks, Connie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 8084
 ATTN PAYROLL
 City Little Rock State AR Zip Code 72203-8084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USABLE Mutual Insurance Company Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 16 / 2018
Transaction ID : 2018091016134-26
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Mickelson, Steve, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Ops Acct and Reporting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 935.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-73
 Amount of Each Receipt this Period 55.00
 Memo Item

C. Mickelson, Steve, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Ops Acct and Reporting
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 935.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-73
 Amount of Each Receipt this Period 55.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Bluepac - Blue Cross Blue Shield Association Pac

A. Myers, Rochelle Y, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) VP Sr Enterprise Strat & Perf Excellen
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1105.00

Date of Receipt 08 / 10 / 2018
Transaction ID : 2018080717254-3
 Amount of Each Receipt this Period 65.00
 Memo Item

B. Myers, Rochelle Y, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) VP Sr Enterprise Strat & Perf Excellen
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1105.00

Date of Receipt 08 / 24 / 2018
Transaction ID : 2018082119133-3
 Amount of Each Receipt this Period 65.00
 Memo Item

C. Nabavi, Catherine, Hansen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Washington Representative
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-3
 Amount of Each Receipt this Period 20.00
 Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Nabavi, Catherine, Hansen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Washington Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-3
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Nehs, Scott, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Sr VP Legal & Licensure
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1615.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-81
 Amount of Each Receipt this Period 95.00
 Memo Item

C. Nehs, Scott, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Sr VP Legal & Licensure
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1615.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-81
 Amount of Each Receipt this Period 95.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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 Association Pac

A. Nelson, Lin M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) Chief Lobbyist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 10 / 2018
Transaction ID : 2018080717254-5
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Nelson, Lin M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) Chief Lobbyist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 24 / 2018
Transaction ID : 2018082119133-5
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Neronha, Monica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 Woodhaven Rd
 City Barrington State RI Zip Code 02806-4330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS of Rhode Island Occupation (for Individual) Avp
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 10 / 2018
Transaction ID : 201808089534-9
 Amount of Each Receipt this Period 15.00
 Memo Item

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) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 59 OF 89
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Neronha, Monica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 Woodhaven Rd
 City Barrington State RI Zip Code 02806-4330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS of Rhode Island Occupation (for Individual) Avp
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **08 / 24 / 2018**
Transaction ID : 2018082116134-9
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Nolan, Brian, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Mgr Con Adm Corp Proc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt **08 / 09 / 2018**
Transaction ID : 2018080716416-17
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Nolan, Brian, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Mgr Con Adm Corp Proc
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt **08 / 23 / 2018**
Transaction ID : 2018082117134-17
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. O'sullivan, Patrick, O., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 8084
 ATTN PAYROLL
 City Little Rock State AR Zip Code 72203-8084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS of Arkansas Occupation (for Individual) Health Insurer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 16 / 2018
Transaction ID : 2018091016134-20
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Ormsby, Robert, Michael, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir Clinical Data Integra
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1785.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-10
 Amount of Each Receipt this Period 105.00
 Memo Item

C. Ormsby, Robert, Michael, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir Clinical Data Integra
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1785.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-10
 Amount of Each Receipt this Period 105.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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 Association Pac

A. Orner, John E Q, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) VP Treasury & Investments
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 10 / 2018
Transaction ID : 2018080717254-2
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Orner, John E Q, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) VP Treasury & Investments
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 24 / 2018
Transaction ID : 2018082119133-2
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Pais, Shel, Howard, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir Operational Audit
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-72
 Amount of Each Receipt this Period 15.00
 Memo Item

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) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 62 OF 89
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Pais, Shel, Howard, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir Operational Audit
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-72
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Patzman, Andrew, David, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Federal Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1280.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-2
 Amount of Each Receipt this Period 80.00
 Memo Item

C. Patzman, Andrew, David, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Federal Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1280.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-2
 Amount of Each Receipt this Period 80.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Portnoy, Jodi, Renee, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Comm Market Solutions
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-41
 Amount of Each Receipt this Period 35.00
 Memo Item

B. Portnoy, Jodi, Renee, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Comm Market Solutions
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-41
 Amount of Each Receipt this Period 35.00
 Memo Item

C. Rehfus, Melissa, LeCompte, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2480 S Beach Pkwy
 City Jacksonville Beach State FL Zip Code 32250-3145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Strategic Services
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-12
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Rehfus, Melissa, LeCompte, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2480 S Beach Pkwy
 City Jacksonville Beach State FL Zip Code 32250-3145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Strategic Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-12
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Rodriguez, Visael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 Exchange St
 City Providence State RI Zip Code 02903-2630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Rhode Is Occupation (for Individual) VP & Chief Diversity Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 10 / 2018
Transaction ID : 201808089534-10
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Rodriguez, Visael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 Exchange St
 City Providence State RI Zip Code 02903-2630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Rhode Is Occupation (for Individual) VP & Chief Diversity Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 24 / 2018
Transaction ID : 2018082116134-10
 Amount of Each Receipt this Period 15.00
 Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Rohan, Christine, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Strategic Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-20
 Amount of Each Receipt this Period 35.00
 Memo Item

B. Rohan, Christine, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Strategic Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-20
 Amount of Each Receipt this Period 35.00
 Memo Item

C. Ruocco, Robert, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 Charleston Ave
 City Buffalo State NY Zip Code 14217-2902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Western New York Occupation (for Individual) VP, CIO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 08 / 13 / 2018
Transaction ID : 6FBACCA84BD046FD8970
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 66 OF 89
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Scannell, Vince, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 N Michigan Ave

City Chicago	State IL	Zip Code 60601-7757
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) ED Workplace Services
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : 2018080716416-78

Amount of Each Receipt this Period
50.00

Memo Item

B. Scannell, Vince, T, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 N Michigan Ave

City Chicago	State IL	Zip Code 60601-7757
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) ED Workplace Services
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2018

Transaction ID : 2018082117134-78

Amount of Each Receipt this Period
50.00

Memo Item

C. Schofield, Denise, Guzzetta, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 N Michigan Ave

City Chicago	State IL	Zip Code 60601-7757
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) ED Clinical Operations
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
935.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : 2018080716416-25

Amount of Each Receipt this Period
55.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	155.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Schofield, Denise, Guzzetta, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Clinical Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 935.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-25
 Amount of Each Receipt this Period 55.00
 Memo Item

B. Senkeeto, Naomi, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9299 Chadburn PI
 City Montgomery Village State MD Zip Code 20886-4035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Policy Analysis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-94
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Senkeeto, Naomi, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9299 Chadburn PI
 City Montgomery Village State MD Zip Code 20886-4035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Policy Analysis
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-94
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	115.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Serota, Scott, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) President & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3269.10

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-70
 Amount of Each Receipt this Period 192.30
 Memo Item

B. Serota, Scott, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) President & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3269.10

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-70
 Amount of Each Receipt this Period 192.30
 Memo Item

C. Sharpe, James, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED and Invest Exec NEBA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-34
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	409.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Sharpe, James, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED and Invest Exec NEBA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-34
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Sherman, Dan, O, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 422 Chessington Dr
 City Crown Point State IN Zip Code 46307-8002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Enterprise IT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-83
 Amount of Each Receipt this Period 12.00
 Memo Item

C. SHERRILL, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 8084 ATTN PAYROLL
 City Little Rock State AR Zip Code 72203-8084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAbLe Mutual Insurance Company Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 16 / 2018
Transaction ID : 2018091016134-8
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	52.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 70 OF 89
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Shoaf, Lori, Loretta, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2322 S Rolfe St
 City Arlington State VA Zip Code 22202-1545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Federal Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-112
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Shoaf, Lori, Loretta, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2322 S Rolfe St
 City Arlington State VA Zip Code 22202-1545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Federal Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-113
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Singh, Rose, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 8084 ATTN PAYROLL
 City Little Rock State AR Zip Code 72203-8084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Cons National Delivery
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 02 / 2018
Transaction ID : 2018091016134-31
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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 Association Pac

A. Singh, Rose, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 8084
 ATTN PAYROLL
 City Little Rock State AR Zip Code 72203-8084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Cons National Delivery
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 16 / 2018
Transaction ID : 2018091016134-32
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Snyder, Julia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 385 Starin Ave
 City Buffalo State NY Zip Code 14216-2030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BlueCross BlueShield of Western New Yo Occupation (for Individual) VP, Corporate Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 13 / 2018
Transaction ID : 3588CE7578AA410C8E3D
 Amount of Each Receipt this Period 60.00
 Memo Item

C. Spruill, Karen, Maria, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11533 Waesche Dr
 City Bowie State MD Zip Code 20721-2269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED FEP Member Experience
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-92
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	145.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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 Association Pac

A. Spruill, Karen, Maria, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11533 Waesche Dr
 City Bowie State MD Zip Code 20721-2269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED FEP Member Experience
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt **08 / 23 / 2018**
Transaction ID : 2018082117134-92
 Amount of Each Receipt this Period 35.00
 Memo Item

B. Sterk, Joyce, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD BPFS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt **08 / 09 / 2018**
Transaction ID : 2018080716416-45
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Sterk, Joyce, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD BPFS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt **08 / 23 / 2018**
Transaction ID : 2018082117134-45
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Stevens, Gill, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1310 G St NW

City Washington	State DC	Zip Code 20005-3000
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) Dir Grassrts and Advocacy
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : 2018080716416-5

Amount of Each Receipt this Period
30.00

Memo Item

B. Stevens, Gill, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1310 G St NW

City Washington	State DC	Zip Code 20005-3000
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) Dir Grassrts and Advocacy
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2018

Transaction ID : 2018082117134-5

Amount of Each Receipt this Period
30.00

Memo Item

C. Stewart, Mark, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 Exchange St

City Providence	State RI	Zip Code 02903-2630
--------------------	-------------	------------------------

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

Name of Employer (for Individual) BCBS of Rhose Island	Occupation (for Individual) Chief Accountning Officer
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2018

Transaction ID : 201808089534-12

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Stewart, Mark, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 Exchange St

City Providence	State RI	Zip Code 02903-2630
--------------------	-------------	------------------------

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

Name of Employer (for Individual) BCBS of Rhose Island	Occupation (for Individual) Chief Accountng Officer
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : 2018082116134-12

Amount of Each Receipt this Period
20.00

Memo Item

B. Sullivan, Maureen, E, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 N Michigan Ave

City Chicago	State IL	Zip Code 60601-7757
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) Sr VP Strategic Services
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1020.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : 2018080716416-53

Amount of Each Receipt this Period
60.00

Memo Item

C. Sullivan, Maureen, E, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 N Michigan Ave

City Chicago	State IL	Zip Code 60601-7757
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) Sr VP Strategic Services
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1020.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2018

Transaction ID : 2018082117134-53

Amount of Each Receipt this Period
60.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	140.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 75 OF 89
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Summers, Bondanzia, Platania, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2695 Thompson Dr

City Marriottsville	State MD	Zip Code 21104-1602
------------------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) ED National Labor Office
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : 2018080716416-86

Amount of Each Receipt this Period
25.00

Memo Item

B. Summers, Bondanzia, Platania, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2695 Thompson Dr

City Marriottsville	State MD	Zip Code 21104-1602
------------------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) ED National Labor Office
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2018

Transaction ID : 2018082117134-86

Amount of Each Receipt this Period
25.00

Memo Item

C. Talluto, Mark, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 N Michigan Ave

City Chicago	State IL	Zip Code 60601-7757
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) VP Strategy & Analytics
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
935.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : 2018080716416-51

Amount of Each Receipt this Period
55.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Talluto, Mark, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Strategy & Analytics
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 935.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-51
 Amount of Each Receipt this Period 55.00
 Memo Item

B. Taylor, Pat, Bonkiewicz, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5226 Cahaba Valley Cv
 City Birmingham State AL Zip Code 35242-3308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED IT Informatics
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-1
 Amount of Each Receipt this Period 60.00
 Memo Item

C. Taylor, Pat, Bonkiewicz, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5226 Cahaba Valley Cv
 City Birmingham State AL Zip Code 35242-3308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED IT Informatics
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-1
 Amount of Each Receipt this Period 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Therrian, Amanda, Gayle, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2720 Williamsburg St

City Alexandria	State VA	Zip Code 22314-6007
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) Executive Washington Rep
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
595.00

Date of Receipt
08 / 09 / 2018
Transaction ID : 2018080716416-101

Amount of Each Receipt this Period
35.00

Memo Item

B. Therrian, Amanda, Gayle, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2720 Williamsburg St

City Alexandria	State VA	Zip Code 22314-6007
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) Executive Washington Rep
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
595.00

Date of Receipt
08 / 23 / 2018
Transaction ID : 2018082117134-101

Amount of Each Receipt this Period
35.00

Memo Item

C. Trimble, James, B, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6017 Shady Oak Ln

City Bethesda	State MD	Zip Code 20817-6025
------------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) ED Political Affairs
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2220.00

Date of Receipt
08 / 09 / 2018
Transaction ID : 2018080716416-90

Amount of Each Receipt this Period
150.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	220.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Trimble, James, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6017 Shady Oak Ln
 City Bethesda State MD Zip Code 20817-6025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Political Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2220.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-90
 Amount of Each Receipt this Period 150.00
 Memo Item

B. Tully, David, Ryan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4320 Underwood St
 City University Park State MD Zip Code 20782-1183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Executive Washington Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-89
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Tully, David, Ryan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4320 Underwood St
 City University Park State MD Zip Code 20782-1183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Executive Washington Rep
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-89
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Urbanczyk, David, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4838 Marathon Dr
 City Madison State WI Zip Code 53705-4830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir Strategic Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 612.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-121
 Amount of Each Receipt this Period 36.00
 Memo Item

B. Urbanczyk, David, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4838 Marathon Dr
 City Madison State WI Zip Code 53705-4830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir Strategic Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 612.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-122
 Amount of Each Receipt this Period 36.00
 Memo Item

C. Vachon, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Admin Services & Chief of Staff Occupation (for Individual) EVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1615.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-37
 Amount of Each Receipt this Period 95.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	167.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Vachon, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Admin Services & Chief of Staff Occupation (for Individual) EVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1615.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-37
 Amount of Each Receipt this Period 95.00
 Memo Item

B. Vanderheyden, Thomas C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) VP Sr Pres & Pres of Diversified Busin
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1190.00

Date of Receipt 08 / 10 / 2018
Transaction ID : 2018080717254-10
 Amount of Each Receipt this Period 70.00
 Memo Item

C. Vanderheyden, Thomas C, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) VP Sr Pres & Pres of Diversified Busin
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1190.00

Date of Receipt 08 / 24 / 2018
Transaction ID : 2018082119133-10
 Amount of Each Receipt this Period 70.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	235.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Vorderstrasse, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 8084
 ATTN PAYROLL
 City Little Rock State AR Zip Code 72203-8084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USABLE Mutual Insurance Company Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 08 / 16 / 2018
Transaction ID : 2018091016134-28
 Amount of Each Receipt this Period 15.00
 Memo Item

B. White, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4414 Knights Ct
 City Roanoke State VA Zip Code 24018-8952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Leg & Reg Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt
 08 / 09 / 2018
Transaction ID : 2018080716416-117
 Amount of Each Receipt this Period 40.00
 Memo Item

C. White, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4414 Knights Ct
 City Roanoke State VA Zip Code 24018-8952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Leg & Reg Policy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt
 08 / 23 / 2018
Transaction ID : 2018082117134-118
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 82 OF 89
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Woodard, Connie, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 816 Belmont Ave
 City Flint State MI Zip Code 48503-2741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir FEP Audits and Comp
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-98
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Woodard, Connie, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 816 Belmont Ave
 City Flint State MI Zip Code 48503-2741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir FEP Audits and Comp
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-98
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Yao, Jiping, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Software Engineer III
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-40
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 83 OF 89
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Yao, Jiping, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Software Engineer III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-40
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Yoder, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8408 Terry Lee Way
 City Severn State MD Zip Code 21144-3466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Integrated Care Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 09 / 2018
Transaction ID : 2018080716416-88
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Yoder, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8408 Terry Lee Way
 City Severn State MD Zip Code 21144-3466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Integrated Care Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 23 / 2018
Transaction ID : 2018082117134-88
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	115.00
TOTAL This Period (last page this line number only).....	10158.22

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 84 OF 89
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Healthy Government Committee-The Political Action Committee Of Blue Cross & Blue Shield Of Arizona,

Mailing Address P.O. Box 13466

City Phoenix	State AZ	Zip Code 85002
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00215202

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2018

Transaction ID : 471C1BD7F9D54A33A31E

Amount of Each Receipt this Period
3500.00

Memo Item
Transfer from affiliated PAC

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Highmark PAC Of Highmark Inc.

Mailing Address 1800 Center Street

City Camp Hill	State PA	Zip Code 17089
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00302844

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
16000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2018

Transaction ID : 7A02187372D44497BDFB

Amount of Each Receipt this Period
2000.00

Memo Item
Transfer from affiliated PAC

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	5500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Big Sky Opportunity PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1618

City Helena State MT Zip Code 59624

Purpose of Disbursement
2018 Contribution

Candidate Name
Big Sky Opportunity PAC

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) Contribution

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 14 / 2018

FEC Identification Number
C00542027
Transaction ID : F6DD4A0B99
Amount of Each Disbursement this Period
2500.00

Memo Item

B. Blaine For Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 98

City St. Elizabeth State MO Zip Code 65075

Purpose of Disbursement
2018 General

Candidate Name
Luetkemeyer, W. Blaine, , ,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify)

State: MO District: 03

Date of Disbursement
MM / DD / YYYY
08 / 14 / 2018

FEC Identification Number
C00458679
Transaction ID : 4FF8C1F0A0f
Amount of Each Disbursement this Period
2500.00

Memo Item

C. CMR Political Action Committee

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2485

City Springfield State VA Zip Code 22152-0485

Purpose of Disbursement
2018 Contribution

Candidate Name
CMR Political Action Committee

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) Contribution

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 14 / 2018

FEC Identification Number
C00469429
Transaction ID : CD8801470E
Amount of Each Disbursement this Period
3000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8000.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Feinstein For Senate 2018

Full Name (Last, First, Middle Initial)

Mailing Address 918 Pennsylvania Ave SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
2018 General

011
Category/
Type

Candidate Name
Feinstein, Dianne, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District:

Date of Disbursement

/ /

FEC Identification Number

C C00539890

Transaction ID : A41052A444E
Amount of Each Disbursement this Period

Memo Item

B. Hoeven For Senate

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 861

City Bismarck State ND Zip Code 58502

Purpose of Disbursement
2022 Primary

011
Category/
Type

Candidate Name
Hoeven, John, Henry, , III

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify)

State: ND District:

Date of Disbursement

/ /

FEC Identification Number

C C00473371

Transaction ID : DD3FE8B59F
Amount of Each Disbursement this Period

Memo Item

C. JET PAC

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2385

City Ottawa State IL Zip Code 61350

Purpose of Disbursement
2018 Contribution

011
Category/
Type

Candidate Name
JET PAC

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼ Contribution

State: District:

Date of Disbursement

/ /

FEC Identification Number

C C00522425

Transaction ID : 81206F3C011
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Klobuchar For Minnesota

Full Name (Last, First, Middle Initial)
Klobuchar For Minnesota

Mailing Address PO Box 4146

City St Paul State MN Zip Code 55104

Purpose of Disbursement 2018 Primary

Candidate Name Klobuchar, Amy, Jean, ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: MN District:

Date of Disbursement: 08 / 08 / 2018

FEC Identification Number: C00431353
Transaction ID : CAC89771CF
Amount of Each Disbursement this Period: 2000.00

Memo Item

B. Lea Marquez Peterson For Congress

Full Name (Last, First, Middle Initial)
Lea Marquez Peterson For Congress

Mailing Address PO Box 40935

City Tucson State AZ Zip Code 85717

Purpose of Disbursement 2018 Primary

Candidate Name Marquez Peterson, Lea, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: AZ District: 02

Date of Disbursement: 08 / 08 / 2018

FEC Identification Number: C00663054
Transaction ID : 86940FFAD2E
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. McSally For Senate Inc

Full Name (Last, First, Middle Initial)
McSally For Senate Inc

Mailing Address 2141 E Camelback Road Ste 250

City Phoenix State AZ Zip Code 85016

Purpose of Disbursement 2018 Primary

Candidate Name McSally, Martha, Elizabeth, ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: AZ District:

Date of Disbursement: 08 / 22 / 2018

FEC Identification Number: C00666040
Transaction ID : A12ACE8E8t
Amount of Each Disbursement this Period: 4000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

7000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) A. Pete Sessions For Congress		Date of Disbursement MM / DD / YYYY 08 / 22 / 2018
Mailing Address PO Box 823047		FEC Identification Number C C00303305 Transaction ID : FB6A6E3D04
City Dallas	State TX	Zip Code 75382-3047
Purpose of Disbursement 2018 General		011 Category/ Type
Candidate Name Sessions, Peter, Anderson, ,		Amount of Each Disbursement this Period 4000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: TX	District: 32	

Full Name (Last, First, Middle Initial) B. Rothfus For Congress		Date of Disbursement MM / DD / YYYY 08 / 30 / 2018
Mailing Address PO Box 435		FEC Identification Number C C00497115 Transaction ID : 17EE02D5B1:
City Sewickley	State PA	Zip Code 15143
Purpose of Disbursement 2018 General		011 Category/ Type
Candidate Name Rothfus, Keith, James, ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: PA	District: 17	

Full Name (Last, First, Middle Initial) C. Russ Fulcher For Idaho		Date of Disbursement MM / DD / YYYY 08 / 15 / 2018
Mailing Address PO Box 1375		FEC Identification Number C C00648295 Transaction ID : 38B1128D0E
City Meridian	State ID	Zip Code 83680
Purpose of Disbursement 2018 General		011 Category/ Type
Candidate Name Fulcher, Russell, M., ,		Amount of Each Disbursement this Period 2500.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: ID	District: 01	

SUBTOTAL of Disbursements This Page (optional)..... ▶

7500.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Walker 4 NC

Mailing Address PO Box 99247

City Raleigh State NC Zip Code 27624

Purpose of Disbursement
2018 General

011
Category/
Type

Candidate Name
Walker, Bradley, Mark, ,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) ▼
State: NC District: 06

Date of Disbursement
MM / DD / YYYY
08 / 01 / 2018

FEC Identification Number
C C00543231
Transaction ID : 352C3C9837
Amount of Each Disbursement this Period
2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Young For Iowa, Inc.

Mailing Address PO Box 162

City Van Meter State IA Zip Code 50261

Purpose of Disbursement
2018 General

011
Category/
Type

Candidate Name
Young, David, Edmund, ,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) ▼
State: IA District: 03

Date of Disbursement
MM / DD / YYYY
08 / 01 / 2018

FEC Identification Number
C C00545616
Transaction ID : AC2986ADB8
Amount of Each Disbursement this Period
2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For:
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	4500.00
TOTAL This Period (last page this line number only).....▶	35500.00